Case 09-20851 B1 (Official Form 1) (1/08)

Doc 1 Filed 08/30/09 Document

0/09 Entered 08/30/09 21:19:09 Desc Main nt Page 1 of 84

United Sta Dist	Voluntar	y Petition			
Name of Debtor (if individual, enter Last, First, Mide Kid Pronghorn Enterprises, Inc		Name of Joint Debtor (Spouse) (Last, First, Middle):			
All Other Names used by the Debtor in the last 8 yea (include married, maiden, and trade names): None		mes used by the Joint I ied, maiden, and trade	Debtor in the last 8 year names):	rs	
Last four digits of Soc. Sec. or Individual-Taxpayer I. (if more than one, state all): EIN: 83-0333188	D. (ITIN) No./Complete EIN	Last four digit (if more than o		idual-Taxpayer I.D. (IT	IN) No./Complete EIN
Street Address of Debtor (No. and Street, City, and 28 Prairie Spring Lane	State)	Street Addres	ss of Joint Debtor (No.	and Street, City, and St	tate
Sheridan, WY	ZIPCODE 82801				ZIPCODE
County of Residence or of the Principal Place of Bus Sheridan	siness:	County of Re	sidence or of the Princ	cipal Place of Business:	
Mailing Address of Debtor (if different from street ad	ddress):	Mailing Add	ress of Joint Debtor (if	different from street ad	ldress):
	ZIPCODE	-			ZIPCODE
Location of Principal Assets of Business Debtor (if d	lifferent from street address a	bove):			ZIPCODE
Type of Debtor (Form of Organization) (Check one box) (C Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.) Image: Corporation (Includes LLC and LLP) Filing Fee (Check one box) Image: Corporation (Includes LLC and LLP) Filing Fee (Check one box) Image: Corporation (Includes LLC and state type of entity below.) Filing Fee (Check one box) Image: Corporation (Image: Corporation Corporation	 O<u>II and Gas Drillin</u> Tax-Exempt Entity (Check box, if applica) Debtor is a tax-exempt orgenuder Title 26 of the United Code (the Internal Revenue) to individuals only) Must at ertifying that the debtor is un See Official Form No. 3A. er 7 individuals only). Must 	g yble) anization 1 States • Code) tach able Check D Check D Check D Check	the P Chapter 7 Chapter 7 Chapter 9 Chapter 11 Chapter 12 Chapter 12 Chapter 13 Debts are prim debts, defined §101(8) as "inc individual prin personal, famil purpose." cone box: Chapt ebtor is a small busines ebtor is not a small busines ebtor is not a small busines ebtor is a ggregate nonc ved to insiders or affili call applicable boxes plan is being filed witt cceptances of the plan	curred by an narily for a ly, or household Fer 11 Debtors ss as defined in 11 U.S. siness as defined in 11 U contingent liquidated de iates) are less than \$2,19	 one box) Petition for of a Foreign of a Foreign of a Foreign occeeding Debts are primarily business debts C. § 101(51D) U.S.C. § 101(51D) bts (excluding debts 90,000 on from one or
Statistical/Administrative Information $\overrightarrow{\mathbf{D}}$ Debtor estimates that funds will be available for distribution	tion to unsecured creditors	I			THIS SPACE IS FOR COURT USE ONLY
Debtor estimates that, after any exempt property is excludistribution to unsecured creditors.		paid, there will be	e no funds available for		
Estimated Number of Creditors Image: Display state Image: Display state Image: Display state 1-49 50-99 100-199 200-999	Image: 1000-5000 5,001-5000	10,001- 25,000	25,001- 50,000 50,000		
Estimated Assets \$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1 million	\$1,000,001 to \$10 million	\$50,000,001 to \$100 million	\$100,000,001 \$500,0 to \$500 to \$1 b million	000,001 More than billion \$1 billion	
Estimated Liabilities \$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1 million	\$1,000,001 \$10,000,001 to \$10 to \$50 million million	\$50,000,001 to \$100 million	\$100,000,001 \$500,0 to \$500 to \$1 to million	000,001 More than billion \$1 billion	

B1 (Officia Case 091208 51 Doc 1 Filed	08/30/09 Entered 08/30/	/09 21:19:09 Desc Main Page 2
Voluntary Petition Doe (This page must be completed and filed in every case) Doe	cument Page 2 of 84 Name of Debtor(s): Kid Pronghorn Er	
All Prior Bankruptcy Cases Filed Within La		
Location NONE Where Filed:	Case Number:	Date Filed:
Location Where Filed: N.A.	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse	, Partner or Affiliate of this Debt	tor (If more than one, attach additional sheet)
Name of Debtor: NONE	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A (To be completed if debtor is required to file periodic reports (e.g. 10K and 10Q) with the Securities and Exchange Commission purs Section 13 or 15(d) of the Securities Exchange Act of 1934 and is relief under chapter 11) Exhibit A is attached and made a part of this petition. 	, forms who suant to requesting I, the attorney for the petitione the petitioner that [he or she] I States Code, and have explain	Exhibit B be completed if debtor is an individual se debts are primarily consumer debts) er named in the foregoing petition, declare that I have informed may proceed under chapter 7, 11, 12, or 13 of title 11, United ed the relief available under each such chapter. d to the debtor the notice required by 11 U.S.C. § 342(b). v for Debtor(s) Date
Does the debtor own or have possession of any property that poses Image: Description of the possession of any property that posses Image: Description of the possession of any property that posses Image: Description of the possession of any property that posses Image: Description of the possession of the possession of the posses Image: Description of the posses <td></td> <td>nd identifiable harm to public health or safety?</td>		nd identifiable harm to public health or safety?
 (To be completed by every individual debtor. If a joint petition is Exhibit D completed and signed by the debtor is attached If this is a joint petition: Exhibit D also completed and signed by the joint debtor 	d and made a part of this petition.	
Informa	ation Regarding the Debtor - Ver	nue
Debtor has been domiciled or has had a resid immediately preceding the date of this petiti		
There is a bankruptcy case concerning debto		
Debtor is a debtor in a foreign proceeding an or has no principal place of business or asser court] in this District, or the interests of the	ts in the United States but is a defendant in	
	Who Resides as a Tenant of Resi heck all applicable boxes)	dential Property
Landlord has a judgment for possession of d	• • ·	te the following.)
	(Name of landlord that obtained judgmer	t)
	(Address of landlord)	
Debtor claims that under applicable non ban entire monetary default that gave rise to the		which the debtor would be permitted to cure the t for possession was entered, and
Debtor has included in this petition the depo period after the filing of the petition.		•
Debtor certifies that he/she has served the L	andlord with this certification. (11 U.S.C. §	362(1)).

Case 09-20851 E	Ooc 1 Filed 08/30	09 Ente	ered 08/30/09 21:19:09	Desc Main
B1 (Official Form 1) (1/08)	Documer		e 3 of 84	Page 3
Voluntary Petition	7 1 • • • •		of Debtor(s):	
(This page must be completed and fi			Pronghorn Enterprises, Inc	
		ignatures		
Signature(s) of Debtor(s) (Individual/Joint)		Signature of a Foreign R	epresentative
I declare under penalty of perjury that the i is true and correct. [If petitioner is an individual whose debts a has chosen to file under chapter 7] I am aw chapter 7, 11, 12, or 13 of title 11, United S available under each such chapter, and cho [If no attorney represents me and no bankru petition] I have obtained and read the notic	are primarily consumer debts ar are that I may proceed under states Code, understand the reli- tose to proceed under chapter 7. uptcy petition preparer signs the	d I decla is true procee (Check	re under penalty of perjury that the infor and correct, that I am the foreign represe ding, and that I am authorized to file this only one box.)	entative of a debtor in a foreign
I request relief in accordance with the chap Code, specified in this petition.	ter of title 11, United States		I request relief in accordance with chapter Code. Certified copies of the documents re- attached.	
Х			Pursuant to 11 U.S.C.§ 1511, I request reli title 11 specified in this petition. A ce recognition of the foreign main proceeding	ertified copy of the order granting
Signature of Debtor		X		
			ignature of Foreign Representative)	
X		(5	ignature of Poleign Representative)	
Signature of Joint Debtor		_		
		(F	rinted Name of Foreign Representative)	
Telephone Number (If not represented b	by attorney)	_		
Date		(Date)	
X /s/ Paul Hunter Signature of Attorney for Debtor(s) PAUL HUNTER Printed Name of Attorney for Debtor(s) Firm Name 2616 Central Avenue Address Cheyenne, WY 82001 307-637-0212 attypaulhunter@ Telephone Number	prodigy.net e-mail	as defi and ha and in 3) if r setting prepar docum require Printe	Signature of Non-Attorney Per are under penalty of perjury that: 1) I am ined in 11 U.S.C. § 110, 2) I prepared the we provided the debtor with a copy of the formation required under 11 U.S.C. § 11 iles or guidelines have been promulgated g a maximum fee for services chargeable ers, I have given the debtor notice of the nent for filing for a debtor or accepting an ed in that section. Official Form 19 is at d Name and title, if any, of Bankruptcy Fe I Security Number (If the bankruptcy per	a bankruptcy petition preparer is document for compensation, is document and the notices 0(b), 110(h), and 342(b); and, d pursuant to 11 U.S.C. § 110 by bankruptcy petition e maximum amount before any ny fee from the debtor, as tached.
8/30/2009 Date *In a case in which § 707(b)(4)(D) applies, t certification that the attorney has no knowled information in the schedules is incorrect.	his signature also constitutes a dge after an inquiry that the		he Social Security number of the officer er of the bankruptcy petition preparer.) (I	
Signature of Debtor (Corpor I declare under penalty of perjury that the is true and correct, and that I have been au behalf of the debtor.	information provided in this pe	ition X		
The debtor requests relief in accordance w United States Code, specified in this petiti		Date		
X /s/ Kurt E. Taylor			ature of bankruptcy petition preparer or on, or partner whose Social Security num	
Signature of Authorized Individual KURT E. TAYLOR		assis	es and Social Security numbers of all oth ted in preparing this document unless the n individual:	
Printed Name of Authorized Individual President			ore than one person prepared this docum orming to the appropriate official form for	
Title of Authorized Individual 8/30/2009 Date		and t	kruptcy petition preparer's failure to comply he Federal Rules of Bankruptcy Procedure ma sonment or both 11 U.S.C. §110; 18 U.S.C. §1	y result in fines or

 $\begin{array}{c} \textbf{B4} \ (Official \ Ferm 4)(12/07)\\ Case \ 09-20851 \end{array}$

Doc 1 Filed 08/30/09 Document

UNITED STATES BANKRUPTCY COURT District of Wyoming

In re Kid Pronghorn Enterprises, Inc

Debtor

Case No. _

Chapter 11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C.§ 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
Name of creditor	Name, telephone number and	Nature of claim	Indicate if	Amount of claim
and complete	complete mailing address,	(trade debt, bank	claim is	[if secured also
mailing address	including zip code, of	loan, government	contingent, unliquidated,	state value of security]
including zip code	employee, agent, or department	contract, etc.	disputed or	
	of creditor familiar with claim		subject to setoff	
	who may be contacted			
GE Capital Corp				39,000.00
P O Box 62291				Collateral FMV
Carol Stream, IL 60197-6729				33,000.00
Reed Hycalog				6,125.00

Reed Hycalog 816 N Circle Dr Casper, WY 82601

First Interstate Bank 1613 Coffeen Ave Sheridan, WY 82801 16,500.00 Collateral FMV 10,000.00

Bankruptcy2009 ©1991-2009, New Hope Software, Inc., ver. 4.4.9-739 - 31043 - PDF-XChange 3.0

(1) Name of creditor and complete mailing address including zip code	(2) Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	(3) Nature of claim (trade debt, bank loan, government contract, etc.	(4) Indicate if claim is contingent, unliquidated, disputed or subject to setoff	(5) Amount of claim [if secured also state value of security]
Wells Fargo Equipment Finance 733 Marquette Ave Suite 700 Minneapolis, MN 55402				51,500.00 Collateral FMV 45,000.00
Pronghorn Drilling, Inc P O Box 805 Glenrock, WY 82637				18,350.00 Collateral FMV 10,000.00
Pronghorn Drilling, Inc P O Box 805 Glenrock, WY 82637				8,560.00
Discover P O Box 30395 Salt Lake City, UT 84130				11,100.00
Chase Card Member P O Box 94014 Palatine, IL 60094-4014				13,250.00
Butler Machinery Company Mr. Troy DeWitz P O BOx 9559 Fargo, ND 58106-9559				15,000.00
Big Horn Hydraulics 507 N. Burma Gillette, WY 82716			Disputed	17,000.00
Bank of America P O Box 17309 Baltimore, MD 21297				21,050.00

Case 09-20851	Doc 1	Filed 08/30/09	Entered 08/30/09 21:19:09	Desc Main
		Document	Page 6 of 84	

(1) Name of creditor and complete mailing address including zip code	(2) Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	(3) Nature of claim (trade debt, bank loan, government contract, etc.	(4) Indicate if claim is contingent, unliquidated, disputed or subject to setoff	(5) Amount of claim [if secured also state value of security]
COP Construction, LLC P O Box 20913 Billings, MT 59104			Disputed	22,000.00
John Deere Credit P O Box 650215 Dallas, TX 75265-0215				84,025.00 Collateral FMV 62,000.00
Alvarado Bit Service 5729 E. Hwy 67 Alvarado, TX 76009			Disputed	49,200.00
Honnen Equipment Company 5217 S. Douglas Hwy Gillette, WY 82718				54,250.00
Wyoming Machinery Company P O Box 2335 Casper, WY 82602				66,510.00
Wells Fargo Business Direct P O Box 348750 Sacramento, CA 95834				76,000.00
Farmer's CO-OP Oil Company P O Box 766 Sheridan, WY 82801				77,805.00
Wells Fargo Bid Loan Accounting WY 10548 Mac U1851-104 P O Box 7666 Boise, ID 83707-1666				215,000.00 Collateral FMV 125,000.00

Filed 08/30/09 Document

(1)	(2)	(3)	(4)	(5)
Name of creditor	Name, telephone number and	Nature of claim	Indicate if	Amount of claim
und complete	complete mailing address,	(trade debt, bank	claim is	[if secured also
mailing address	including zip code, of	loan, government	contingent, unliquidated,	state value of security]
including zip code	employee, agent, or department	contract, etc.	disputed or	
	of creditor familiar with claim		subject to setoff	
	who may be contacted			

Wells Fargo Equipment Finance 733 Marquette Ave, Suite 700 Minneapolis, MN 55402 330,850.00 Collateral FMV 175,000.00

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, [the president or other officer or an authorized agent of the corporation] named as debtor in this case, declare under penalty of perjury that I have read the foregoing LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS and that it is true and correct to the best of my information and belief.

Date 8/30/2009

Signature

/s/ Kurt E. Taylor

KURT E. TAYLOR, President **B6 Cover (Form 6 Cover) (12/07)**

FORM 6. SCHEDULES

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property Schedule B - Personal Property Schedule C - Property Claimed as Exempt Schedule D - Creditors Holding Secured Claims Schedule E - Creditors Holding Unsecured Priority Claims Schedule F - Creditors Holding Unsecured Nonpriority Claims Schedule G - Executory Contracts and Unexpired Leases Schedule H - Codebtors Schedule I - Current Income of Individual Debtor(s) Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or it part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

B6A (Official FGASA) 92/89851

Bankruptcy2009 @1991-2009, New Hope Software, Inc., ver. 4.4.9-739 - 31043 - PDF-XChange 3.0

Filed 08/30/09 Document

Doc 1

Entered 08/30/09 21:19:09 Desc Main Page 9 of 84

In re Kid Pronghorn Enterprises, Inc

Debtor

Case No. _

(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				
	Tota	վ	0.00	

B6B (Official For Star 68) (92,69) 851	Doc	1
----------------------------------------	-----	---

Filed 08/30/09 Document F

Entered 08/30/09 21:19:09
 Page 10 of 84

In re Kid Pronghorn Enterprises, Inc

Debtor

Case No. _

(If known)

Desc Main

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFF, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Cash Kid Pronghorn Enterprises, Inc		1,000.00
 Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, 		Checking account 0211 (Estimated balance) Cowboy State Bank		2,125.00
or cooperatives.		Checking account 6610 (Estimated balance) First Interstate Bank		8,750.00
		Checking account 4017 (Estimated balance) Morgan Stanly Bank, NA		680.00
 Security deposits with public utilities, telephone companies, landlords, and others. 	Х			
 Household goods and furnishings, including audio, video, and computer equipment. 	Х			
 Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. 	Х			
6. Wearing apparel.	Х			
7. Furs and jewelry.	Х			
8. Firearms and sports, photographic, and other hobby equipment.		Casino equipment (tables, chips, cards) Kid Pronghorn Enterprises, Inc		1,000.00
 Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. 	Х			

г

Debtor

Case No. ____

(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
 Annuities. Itemize and name each issuer. Interests in an education IRA as defined in 26 	X X			
U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	Λ			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.		JDS Uniphase CP New Kid Pronghorn Enterprises, Inc		21.78
		Moduslink Global Solutions, Inc		58.25
		Kid Pronghorn Enterprises, Inc		
		MS Health Science trust B Kid Pronghorn Enterprises, Inc		2,387.00
		MS Capital Opportunities Trust B		1,428.00
		Kid Pronghorn Enterprises, Inc		1,120100
		MS Special Value Fund B Kid Pronghorn Enterprises, Inc		2,629.00
		MS Focus Growth Fund B		1,103.00
		Kid Pronghorn Enterprises, Inc		
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.		Exhibit "A" Account receivable Kid Pronghorn Enterprises, Inc		1,895.00
 Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars. 	X			

Debtor

Case No. ___

(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
 Other liquidated debts owing debtor including tax refunds. Give particulars. 		Exhibit "B" Liquidated debts owing debtor		83,179.00
 Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. 	Х			
20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	Х			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.	Х			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1993 10'x42' taylor trailer (VIN S26254 W)		5,000.00
		1511 Mydland Rd. Lot 48 Sheridan, WY 82801		
		1994 16'x80' Champion Mobile Home (VIN 05945387559)		44,500.00
		1511 Mydland Rd. Lot 84 Sheridan, WY 82801		
		14'x70' Mobile Home (VIN 6229N)		18,950.00
		1511 Mydland Rd. Lot 154 Sheridan, WY 82801		
		1986 16'x65' Gallatin Mobile Home (VIN CH4657) 1511 Mydland Rd. Lot 169 Sheridan, WY 82801		14,500.00

Debtor

Case No. _

(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
26. Boats, motors, and accessories.		1984 Ranger Comanche Boat Kid Pronghorn Enterprises, Inc		2,500.00
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.		Exhibit "D" Office equipment, furnishings and supplies Kid Pronghorn Enterprises, Inc		2,115.00
29. Machinery, fixtures, equipment, and supplies used in business.		Exhibit "C" Business Equipment Kid Pronghorn Enterprises, Inc		2,330,155.00
		Exhibit "E" Machinery, fixtures, equipment and supplies Kid Pronghorn Enterprises, Inc		13,275.00
30. Inventory.		Exhibit "F" Inventory Kid Pronghorn Enterprises, Inc		65,625.00
		Gear End At Armstrong Machinery		17,000.00
31. Animals.	x			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
		0 continuation sheets attached T	otal	\$ 2,619,876.03

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Document Page 14 of 84

Kid Pronghorn Enterprises, Inc

Exhibit "A" Account Receivable

Item	Value
Woodland Park Lot #25	450
West Park Lot #48	210
West Park Lot #84	300
West Park Lot #154	250
West Park Lot #169	250
821 Ponderosa Dr	435
Total	1895

Exhibit "B" Liquidated debts owing debtor

Item	Value
COP Construction, LLC	43179
Pinnacle Gas Resources, Inc	40000
Total	83179

2002 F-350 Pickup XI3 Aug 909 8851 Doc 1	Filed 08/305000	KF Progreed (08/96/09:21	19.09 \$000	SC M 5 500.00	No
2002 F350 Pickup Tan	Ddoum\$3,500.00	Kid Bronghern Enterprises, Inc.	\$0.00	\$3,500.00	No
2002 F-350 Dually Pickup Grey	DUCUIII \$6,800.00	Kid Pronghern Enterprises, Inc. Kid Pronghom Enterprises, Inc.	\$0.00	\$6,600.00	No
2000 F-350 Silver Crew Cab w/box	\$3,500.00	Kid Pronghom Enterprises, Inc.	\$0.00	\$3,500.00	No
2000 F-350 Nevy Blue Crew Cab (Parts Only)	\$2,000.00	Kid Pronghorn Enterprises, Inc.	\$0.00	\$2,000.00	No
2001 F-350 Med/Bm Crew Cab		Kid Pronghorn Enterprises, Inc.	\$0.00	\$4,500.00	No
2001 F-450 Flatbed Dually Silver (Parts Only)	\$2,000.00	Kid Pronghom Enterprises, Inc.	\$0.00	\$2,000.00	No
2001 F-250 GLD/BLK		Kid Pronghorn Enterprises, Inc.	\$0.00	\$3,500.00	No
2001 F-150 Sandstone	\$4,000.00	Kid Pronghorn Enterprises, Inc.	\$0.00	\$4,000.00	No
1999 F-250 Ex-cab Green	\$1,500.00	Kid Pronghorn Enterprises, Inc.	\$0.00	\$1,500.00	No
1976 Ford F-250	\$2,600.00	Kid Pronghorn Enterprises, Inc.	\$0.00	\$2,600.00	No
2000 GMC 6500	\$8,250.00	Kid Pronghom Enterprises, Inc.	\$0,00	\$8,250.00	No
1978 Ford Cargo Van	\$1,000,00	Kid Pronghorn Enterprises, Inc.	\$0.00	\$1,000.00	No
1986 Ford Winch Trk. Red	\$1,200.00	Kid Pronghorn Enterprises, Inc.	\$0.00	\$1,200.00	No
1981 Chevrolet Cargo van	\$800.00	Kid Pronghorn Enterprises, Inc.	\$0.00	\$800.00	No
1968 International Cargo Van	\$800.00	Kid Pronghom Enterprises, Inc.	\$0.00	\$800.00	No
1966 38' Cargo Trailer	\$1,500.00	Kid Pronghorn Enterprises, Inc.	\$0.00	\$1,500,00	No
1986 53' Box Van		Kid Pronghorn Enterprises, Inc.	\$0.00	\$2,000.00	No
1988 53' Box Van		Kid Pronghorn Enterprises, Inc.	\$0.00	\$2,000.00	No
1977 Taibert Tir. Double Drop Deck T3BD-77K-HRGT1	\$11,350.00	Kid Pronghorn/Chopping	\$6,800.00	\$4,550.00	No
2002 Wabash Single Drop Deck		Kid Pronghorn/Chopping	\$17,050.00	\$1,700.00	No
1994 Trail Eze Equipment Tir.	\$18,650.00	Kid Pronghom/Chopping	\$15,215.00	\$3,435.00	No
1970 General Belly Dump		Kid Pronghom/Chopping	\$6,875.00	\$625.00	No
1986 Load King Belly Dump		Kid Pronghom/Chopping	\$14,720.00	\$780.00	Na
1944 Treq Flatbed Tir. Refurbished	\$1,850.00	Kid Pronghorn Enterprises, Inc.	\$0.00	\$1,850,00	No
1983 42' Cargo Trailer		Kid Pronghorn Enterprises, Inc.	\$0.00	\$1,250.00	No
2006 Lamar Dump Tk.		FIB/Kid Pronghorn	\$5,460.00	\$2,740.00	No
2001 Flatbed Trailer (Backhoe Trailer)		Kid Pronghom Enterprises, Inc.	\$0.00	\$4,500.00	No
2001 Diamond T flatbed		Kid Pronghorn Enterprises, Inc.	\$0.00	\$2,100.00	No
2001 Diamond T car Trailer		Kid Pronghorn Enterprises, Inc.	\$0,00	\$2,000.00	No
2006 Lamar car Traller BLK		Kid Pronghorn Enterprises, Inc.	\$0.00	\$2,500.00	No
2006 Lemar car Trailer Gray		Kid Pronghorn Enterprises, Inc.	\$0.00	\$2,250.00	No
2005 PJ utility Trailer		Kid Pronghorn Enterprises, Inc.	\$0.00	\$750.00	No
2006 PJ Goose Neck Trailer		Kid Pronghorn Enterprises, Inc.	\$0.00	\$8,500.00	No
2005 Starcraft Camper		Kid Pronghorn Enterprises, Inc.	\$0,00	\$4,500.00	No
2007 Lamar Utility TLR Single Axle BLK	\$950.00	Kid Pronghorn Enterprises, inc.	\$0.00	\$950.00	No
2006 Intestate Cargo Van BLK-1		Kid Pronghorn Enterprises, Inc.	\$0.00	\$3,000,00	No
2007 Intestate Cargo Van Gray/Silver		Kid Pronghorn Enterprises, Inc.	\$0.00	\$3,850.00	No
2007 Intestate Cargo Van BLK-2		FIB/Kid Pronghorn	\$2,785.00	\$715.00	No
Olympia Steel Building (unassembled)	\$24,500.00	Kid Pronghorn Enterprises, inc.	\$0.00	\$24,500.00	No
Updated 5/26/2009					
Rigs and equipment list	\$2,330,155.00		s and	\$1,306,112.89	

and and a second sec

un a-bunkataidige en ja

2.003200

*** 1.80

1

opti ne ma

····· 94,*

	E	XHIE	IT	
5				
	C	-		
				-]

I- PDC 8 3/4" drill Disse 09-20851 Doc		\$0.00	SC Main	No
5-12 1/4" Mill tooth bits	Documer, 600.00 Rage gil on Biterrises, Inc.	\$0.00	\$4,500.00	No
9 7/8" button bits	\$2,500.00 Kid Pronghom Enterprises, inc.	\$0.00	\$2,500.00	No
5-14 3/4" Mill tooth bits	\$3,500.00 Kid Pronghom Enterprises, Inc.	\$0.00	\$3,500.00	No
5-97/8" mill tooth bits	\$2,500.00 Kid Pronghom Enterprises, Inc.	\$0.00	\$2,500.00	No
- Washington Diverters w/ drive	\$2,000.00 Kid Pronghorn Enterprises, Inc.	\$0.00	\$2,000.00	No
000 Amida Light Tower Al4060D-4MH	\$2,500.00 Kid Pronghorn Enterprises, Inc.	\$0.00	\$2,500.00	No
001 Amida Light Tower Al4060D-4MH	\$2,500.00 Kid Pronghom Enterprises, Inc.	\$0.00	\$2,500.00	No
005 Terex Lite Tower AL4680D	\$4,500.00 Kid Pronghom Enterprises, Inc.	\$0.00	\$4,500.00	No
005 Terex Lite Tower AL4680D	\$4,500.00 Kid Pronghorn Enterprises, inc.	\$0.00	\$4,500.00	No
006 Terex Lite Tower AL4680D	\$4,500.00 Kid Pronghom Enterprises, Inc.	\$0.00	\$4,500,00	No
006 Almand Maxi Heat	\$15,000.00 Kid Pronghom Enterprises, Inc.	\$12,800.00	\$2,200.00	No
006 Almand Maxi Heat	\$15,000.00 Kid Pronghom Enterprises, Inc.	\$12,800.00	\$2,200.00	No
PD-2001 Charge pump w/ John Deere 100hp	\$12,350.00 Kid Pronghom Enterprises, Inc.	\$0.00	\$12,350.00	No
007 Bobcat T-250 Skid Loader	\$42,650.00 Kid Pronghom Enterprises, Inc.	\$39,175.00	\$3,475.00	No
15 Newholland Track Hoe	\$18,500.00 Pronghoth Orill Inc/lease	\$0.00	\$18,500.00	No
008 310SJ John Deere	\$89,650.00 Kid Protighom/John Deere Credit	\$84,750.00	\$4,900.00	No
003 760 Terex Backhoe	\$19,500.00 Kid Pronghom Enterprises, Inc.	\$0.00	\$19,500.00	No
004 760B Terex Backhoe	\$22,300.00 Kid Pronghorn Enterprises, Inc.	\$0.00	\$22,300,00	No
005 760B Terex Backhoe	\$26,500.00 Kid Pronghom Enterprises, Inc.	\$0,00	\$28,500.00	No
000 575 Ford backhoe 4x4 w extend	\$15,000,00 Kid Pronghorn Enterprises, Inc.	\$0.00	\$15,000.00	No
001 416IT Caterpiller Backhoe	\$35,250.00 Pronghom Drill Inc/lease	\$32,500.00	\$2,750.00	No
983 John Deere 350C Dozer w/ 6-way	\$6,600,00 Kid Pronghom Enterprises, Inc.	\$0.00	\$6,600.00	No
993 Miller Bobcat 225G welder w/leads	\$1,600.00 Kid Pronghom Enterprises, Inc.	\$0.00	\$1,800.00	No
999 Miller Bobcat 225G welder w/leads	\$1,650.00 Kid Pronghorn Enterprises, Inc.	\$0,00	\$1,650.00	No
001 Miller Bobcat 225G welder w/leada	\$1,800.00 Kid Pronchom Enterprises, Inc.	\$0.00	\$1,800.00	No
002 Miller Bobcat 250G welder w/leads	\$1,800.00 Kid Pronghorn Enterprises, Inc.	\$0.00	\$1,800.00	No
004 Miller Bobcat 250G weider w/leads	\$2,000.00 Kid Pronghorn Enterprises, Inc.	\$0.00	\$2,000.00	No
ardnar-Denver FZ-FXZ dueplex mud pump	\$22,500.00 Pronghorn Drill inc/lease	\$17,500.00	\$5,000.00	No
msco D-375 dueplex mud pump	\$33,500.00 Kid Pronghorn Enterprises, Inc.	\$0,00	\$33,500.00	No
msco D-375 dueplex mud pump	\$26,000.00 Kid Pronghorn Enterprises, Inc.	\$13,691.11	\$12,308,89	No
msco D-175 dueplex mud pump	\$18,500.00 Kid Pronghom Enterprises, Inc.	\$0.00	\$18,500.00	No
msco D-300 dueplex mud pump (Parts Only)	\$4,000.00 Kid Pronghorn Enterprises, Inc.	\$0.00	\$4,000.00	No
ardner-Denver FY-FXD dueplex mud pump	\$22,450.00 Kid Pronghom Enterprises, Inc.	\$0.00	\$22,450.00	No
003 Dodge 2500 Char. (Engine Blown)	\$4,500.00 FIB/Kid Pronghorn	\$5,266.00	-\$766.00	No
004 Dodge 3500 Gold	\$12,250.00 FIB/Kid Pronghom	\$7,750.00	\$4,500.00	No
006 Dodge 3500 BLK	\$21,600.00 FIB/Kid Pronghorn	\$8,250.00	\$13,350.00	No
004 F-350 Pickup Beige	\$7,525.00[FIB/Kid Pronghorn	\$12,450.00	-\$4,925.00	No
003 F-350 Pickup Sandstone	\$6,800.00 FIB/Kid Pronghorn	\$10,500.00	-\$3,700.00	No
003 Excursion	\$16,750.00 FIB/Kid Pronghorn	\$15,650.00	\$1,100.00	Na
002 Ford Pickup Beige Fitbd, Xtra Box	\$4,500.00 Kid Pronghorn Enterprises, Inc.	\$0.00	\$4,500.00	No

Case 09-20851	Doc 1	Filed 08/30/09	Entered 08/30/09 21:19:09	Desc Main
		Document	Page 17 of 84	

Exhibit "D" Office Equipment, furnishings and supplies

Item	Value
Aura computer tower	400
Samsung flat panel	350
HP Inkjet printer	150
Oak desk, oak filing cabinets	375
Stationary supplies	225
Sentrysafe	265
Storage containers (waterproof)	350
Total	2115

Kid Pronghorn Enterprises, Inc

Exhibit "E" Machinery, fixtures, equipment and supplies

Item	Value
Victor cutting torch, hose and tips	325
Hand tools (wrenches, sockets, hammers)	1175
Large pipe wrenches, sledge hammers	850
Fuel tanks (L-shape)	1000
Fuel tanks (1000 gallon size)	2000
Tool boxes (truck bed)	600
Fuel pumps (12 volt)	900
Power tools (drills and grinders)	750
Miller wire feed welder	1675
Miller plasma cutter	2100
Muliquip generator	1550
Propane bottles	350
Total	13275

Exhibit	"F"	Inventory
---------	-----	-----------

Item	Value
FY-FXD swabs, liners, rods	4500
FY-FXD valves, seats, gaskets & packing	5150
D-375 Emsco swabs, liners, rods	9200
D-375 valves, seats, gaskets & packing	4350
D-175 Emsco swabs, liners, rods	1500
D-175 valves, seats, gaskets & packing	650
Hoses (suction, discharge, 1" to 8")	3400
Hoses (hydraulic)	1800
Tires (Large truck)	6500

Case 09-20851	Doc 1	Filed 08/30/09	Entered 08/30/09 21:19:09	Desc Main
		Document	Page 18 of 84	

Tires (small truck)	2525
Tires (trailer)	3000
Tire chains	2400
Bearings	2950
U-joints	3250
Filters (oil, fuel and air)	1750
Bolts, nuts and washers	900
Hydraulic fittings	1300
Pipe fillings	1000
Roller chains (single row to 8 row)	2500
Chains, binders and boomers	1800
Shovels (spade and square)	350
Oil, grease	650
Cleaning supplies	250
PVC casing	800
Belts (C-drive)	500
Belts (Web-drive)	200
Metal (new)	1500
Metal (scrap)	750
Welding rod	200
Total	65625

Case 09-20851 B6C (Official Form 6C) (12/07)

Debtor

Case No.

(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: (Check one box)

□ 11 U.S.C. § 522(b)(2)

11 U.S.C. § 522(b)(3)

 $\hfill\square$ Check if debtor claims a homestead exemption that exceeds \$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Not Applicable.			

Filed 08/30 Documen

3/30/09	Entered 08/30/09 21:19:09	Desc Main
nent	Page 20 of 84	

B6D (Official Form 6D) (12/07)

In re Kid Pronghorn Enterprises, Inc

Debtor

Case No. _

(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		Incurred: 3/15/08					350.00
x		Lien: Mechanics Lien Security: Equipmnet				17,350.00	
		VALUE \$ 17,000.00					
		Incurred: 8/17/07					1,600.00
x		Security: Furniture				3,400.00	1,000.00
		VALUE \$ 1,800.00					
┢		Lien: PMSI in vehicle < 910 days					4,512.00
x		Security: 2003 Excursion				14,512.00	1,012100
		VALUE \$ 10,000.00					
		(Total c	Sub	tota	(≻	\$ 35,262.00	\$ 6,462.00
			1	Cotal	>	\$	\$
	x		X Incurred: 3/15/08 Lien: Mechanics Lien Security: Equipmnet X VALUE \$ 17,000.00 VALUE \$ 17,000.00 Incurred: 8/17/07 Security: Furniture X VALUE \$ 1,800.00 X Lien: PMSI in vehicle < 910 days Security: 2003 Excursion X VALUE \$ 10,000.00	X Incurred: 3/15/08 Lien: Mechanics Lien Security: Equipmnet VALUE \$ 17,000.00 VALUE \$ 17,000.00 X Incurred: 8/17/07 Security: Furniture X VALUE \$ VALUE \$ 1,800.00 VALUE \$ 1,800.00 X VALUE \$ VALUE \$ 1,800.00 VALUE \$ 1,000.00	X Incurred: 3/15/08 Lien: Mechanics Lien Security: Equipmnet X VALUE \$ 17,000.00 VALUE \$ 17,000.00 Incurred: 8/17/07 Security: Furniture X Incurred: 8/17/07 Security: Furniture X Lien: PMSI in vehicle < 910 days Security: 2003 Excursion X Lien: PMSI in vehicle < 910 days Security: 2003 Excursion X VALUE \$ 10,000.00	X Incurred: 3/15/08 Lien: Mechanics Lien Security: Equipmnet X VALUE \$ 17,000.00 VALUE \$ 17,000.00 Incurred: 8/17/07 Security: Furniture X VALUE \$ 1,800.00 X Lien: PMSI in vehicle < 910 days Security: 2003 Excursion X Lien: PMSI in vehicle < 910 days Security: 2003 Excursion	Weight of the second

(Report also on (If applicable, report Summary of Schedules) also on Statistical

s) also on Statistical Summary of Certain Liabilities and Related Data.)

Document

____,

Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Page 21 of 84

B6D (Official Form 6D) (12/07) - Cont.

In re Kid Pronghorn Enterprises, Inc

Case No. ____

Debtor

(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 1331 First Interstate Bank 1613 Coffeen Ave Sheridan, WY 82801	x		Lien: PMSI in vehicle < 910 days Security: Interstate Cargo Trailer VALUE \$ 2.500.00				2,675.00	175.00
ACCOUNT NO. 2581 First Interstate Bank 1613 Coffeen Ave Sheridan, WY 82801	x		VALUE \$ 2,500.00 Incurred: 10/19/07 Lien: PMSI in vehicle < 910 days Security: Dump Trailer VALUE \$ 4,525.00				5,450.00	925.00
ACCOUNT NO. 7971 First Interstate Bank 1613 Coffeen Ave Sheridan, WY 82801	x		Lien: PMSI in vehicle < 910 days Security: 2003 and 2004 Dodge VALUE \$ 10,000.00				14,650.00	4,650.00
ACCOUNT NO. 7970 First Interstate Bank 1613 Coffeen Ave Sheridan, WY 82801	x		Lien: PMSI in vehicle < 910 days Security: 2006 Dodge Duelly VALUE \$ 5,000.00				7,850.00	2,850.00
ACCOUNT NO.8314 First Interstate Bank 1613 Coffeen Ave Sheridan, WY 82801	x		Lien: PMSI Security: Maxi Heaters VALUE \$ 10,000.00				16,500.00	6,500.00
Sheet no. <u>1</u> of <u>3</u> continuation sheets attached to Schedule of Creditors Holding Secured Claims	to		Su (Total(s) o (Use only o	t thi T	otal	g (s) ge)	\$ 47,125.00 \$ (Report also on Summary of Schedule	\$ (If applicable, reposed) (If applicable, rep

Liabilities and Related Data.)

Document

____,

Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Page 22 of 84

B6D (Official Form 6D) (12/07) - Cont.

In re Kid Pronghorn Enterprises, Inc

Case No. ____

Debtor

(If known)

Data.)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 2588 First Interstate Bank P O Box 30918 Billings, MT 59116	x		Incurred: 12/3/05 Lien: PMSI in vehicle < 910 days Security: 2003 F-350 Crew Cab				10,267.00	2,267.00
ACCOUNT NO. 2591 First Interstate Bank P O Box 30918 Billings, MT 59116	x		VALUE \$ 8,000.00 Incurred: 12/3/05 Lien: PMSI in vehicle < 910 days Security: 2004 F-350 Crew Cab				12,288.00	2,288.00
ACCOUNT NO. 1000 GE Capital Corp P O Box 62291 Carol Stream, IL 60197-6729	x		VALUE \$ 10,000.00 Incurred: 8/4/07 Security: T-250 Bobcat VALUE \$ 33,000.00				39,000.00	6,000.00
ACCOUNT NO. 88AA John Deere Credit P O Box 650215 Dallas, TX 75265-0215	x		Incurred: 2/6/08 Lien: PMSI in vehicle < 910 days Security: 2008 310 SJ John Deere VALUE \$ 62,000.00				84,025.00	22,025.00
ACCOUNT NO. Pronghorn Drilling, Inc P O Box 805 Glenrock, WY 82637	x		Incurred: 5/15/06 Lien: PMSI Security: 1988 Peterbuilt VALUE \$ 10,000.00				18,350.00	8,350.00
Sheet no. <u>2</u> of <u>3</u> continuation sheets attached Schedule of Creditors Holding Secured Claims	to		(Use only or	f thi T	s pa otal(g ∳ (s) ge)	\$ 163,930.00 \$ (Report also on Summary of Schedule	\$ (If applicable, reported) (If applicable,

Bankruptcy2009 ©1991-2009, New Hope Software, Inc., ver. 4.4.9-739 - 31043 - PDF-XChange 3.0

Document

____,

Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Page 23 of 84

B6D (Official Form 6D) (12/07) - Cont.

In re Kid Pronghorn Enterprises, Inc

Case No. ____

Debtor

(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.			Incurred: 2/5/07 Lien: PMSI					1,850.00
Pronghorn Drilling, Inc P O Box 805 Glenrock, WY 82637	Х		Security: 416 Caterpillar				31,850.00	
			VALUE \$ 30,000.00	1				
ACCOUNT NO. 6395			Incurred: 2/5/09					90,000.00
Wells Fargo Bid Loan Accounting WY 10548 Mac U1851-104 P O Box 7666	X		Lien: PMSI Security: 1980 CCCMtd. SS-22				215,000.00	
Boise, ID 83707-1666			VALUE \$ 125,000.00	1				
ACCOUNT NO. 8400			Incurred: 4/6/09					6,500.00
Wells Fargo Equipment Finance 733 Marquette Ave Suite 700 Minneapolis, MN 55402	X		Lien: PMSI Security: 1982 CCC Mtd,. 70K				51,500.00	
			VALUE \$ 45,000.00	ł				
ACCOUNT NO. 8700			Incurred: 4/15/07					155,850.00
Wells Fargo Equipment Finance 733 Marquette Ave, Suite 700 Minneapolis, MN 55402	X		Lien: PMSI Security: 2005 Gefoo Drilling Rig				330,850.00	100,000.00
			VALUE \$ 175,000.00	1				
ACCOUNT NO.								
			VALUE \$					
Sheet no. 3 of 3 continuation sheets attack Schedule of Creditors Holding Secured Claim			Su	btot	al (s)>	\$ 629,200.00	\$ 254,200.00
Schedule of Creations Holding Secured Claim	13		(Total(s) o (Use only o	Т	otal	s)	\$ 875,517.00	\$ 316,692.00
					pu		(Report also on Summary of Schedule	(If applicable, repo s) also on Statistical Summary of Certa

Liabilities and Related Data.)

File Do

d 08/30/09	Entered 08/30/09 21:19:09	Desc Main
ocument	Page 24 of 84	

Kid Pronghorn Enterprises, Inc In re

B6E (Official Form 6E) (12/07)

Debtor

Case No. (if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H,""W,""J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

 \checkmark Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Document Page 25 of 84

B6E (Official Form 6E) (12/07) - Cont.

In re	Kid Pronghorn	Enterprises, Inc	
mie			

Debtor

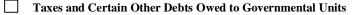
Case No.	
	(if known)

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to 2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. 507(a)(7).



Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0

___ continuation sheets attached

Filed 08/3 Docume

3/30/09	Entered 08/30/09 21:19:09	Desc Mair
nent	Page 26 of 84	

B6F (Official Form 6F) (12/07)

In re Kid Pronghorn Enterprises, Inc

Debtor

Case No. ____

(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. A-Plus Services, LLC P O Box 7280 Sheridan, WY 82801	x		Incurred: 7/1/08 Consideration: Storage/Lot rent				5,400.00
ACCOUNT NO. Allen Inspection Services P O Box 583 Mills, WY 82644	x		Incurred: 9/4/08 Consideration: Pipe repairs				3,850.00
ACCOUNT NO. 2716 Alltel P O Box 79033 Phoenix, AZ 85062	x		Incurred: 5/21/09 Consideration: Business cell phone				407.00
ACCOUNT NO. Alvarado Bit Service 5729 E. Hwy 67 Alvarado, TX 76009	x		Incurred: 11/15/07 Consideration: Revolving charge account PDC Bits			x	49,200.00
6 Subtotal > \$							

Total (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$

Document

Entered 08/30/09 21:19:09 Desc Main Filed 08/30/09 Page 27 of 84

B6F (Official Form 6F) (12/07) - Cont.

In re Kid Pronghorn Enterprises, Inc

Debtor

Case No. _

(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Anderson Seismograph Bit P O box 313 2589 N. Salt Creek Hwy Casper, WY 82602	x		Incurred: 10/2/08 Consideration: Revolving charge account Underreamer supplies				5,100.00
ACCOUNT NO. 5017 Bank of America P O Box 17309 Baltimore, MD 21297	x		Incurred: 1/6/07 Consideration: Credit card debt				21,050.00
ACCOUNT NO. dP01 Big Horn Hydraulics 507 N. Burma Gillette, WY 82716	x		Incurred: 12/6/07 Consideration: Repairs			x	17,000.00
ACCOUNT NO. 0649 Butler Machinery Company Mr. Troy DeWitz P O BOx 9559 Fargo, ND 58106-9559	x		Incurred: 1/8/08 Consideration: Equipment rental				15,000.00
ACCOUNT NO. 0797 Chase Card Member P O Box 94014 Palatine, IL 60094-4014	x		Incurred: 5/15/09 Consideration: Credit card debt also Account 0632				13,250.00
Sheet no. <u>1</u> of <u>6</u> continuation sheets atta to Schedule of Creditors Holding Unsecured Nonpriority Claims	ched			Sub T	tota Tota		\$ 71,400.00 \$

Document

Entered 08/30/09 21:19:09 Desc Main Filed 08/30/09 Page 28 of 84

B6F (Official Form 6F) (12/07) - Cont.

In re Kid Pronghorn Enterprises, Inc

Debtor

Case No.

(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WHFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Christensen Enterprises P O Box 219	X		Incurred: 3/25/09 Consideration: Repairs				2,515.00
Ranchester, WY 82830							
ACCOUNT NO. 2012			Incurred: 5/15/09 Consideration: Credit card debt				
Citibank P O Box 6309 The Lakes, NV 88901-6309	х		Consideration: Credit card debt				3,700.00
ACCOUNT NO. 1682			Incurred: 5/15/09				
Citibank P O Box 6411 The Lakes, NV 88901-6411	x		Consideration: Credit card debt				1,136.00
ACCOUNT NO.			Incurred: 10./22/08	┝		┝	
COP Construction, LLC P O Box 20913 Billings, MT 59104	x		Damage			х	22,000.00
ACCOUNT NO. 9277		-	Incurred: 5/4/09	┢	┝	┝	
Discover P O Box 30395 Salt Lake City, UT 84130	x		Consideration: Credit card debt				11,100.00
Sheet no. 2 of <u>6</u> continuation sheets a to Schedule of Creditors Holding Unsecured	tached	l		Sub	tota	1>	\$ 40,451.00
to Schedule of Creditors Holding Unsecured Nonpriority Claims				Т	ota	≻	\$

Document

Entered 08/30/09 21:19:09 Desc Main Filed 08/30/09 Page 29 of 84

B6F (Official Form 6F) (12/07) - Cont.

In re Kid Pronghorn Enterprises, Inc

Debtor

Case No. _

(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Incurred: 7/14/08				
Economy Bit Service, Inc P O Box 50368 Casper, WY 82605	x		Consideration: Bits and repairs				2,180.00
ACCOUNT NO. 9212			Incurred: 10/14/07				
Farmer's CO-OP Oil Company P O Box 766 Sheridan, WY 82801	x		Consideration: Fuel and Oil products				77,805.00
ACCOUNT NO.			Consideration: Collecting for Alltel				
First Collection Services 10925 Otter Creek E. Blvd Mabelvale, AR 72103	x						Notice Only
ACCOUNT NO.						-	
Fourth Judicial District Court Sheridan County Courthouse 224 South Main Street, Suite B11 Sheridan, WY 82801							Notice Only
ACCOUNT NO.			Consideration: Welding supplies				
Gasses Plus P O Box 789 Gillette, WY 82717-0789	x						1,375.00
Sheet no. <u>3</u> of <u>6</u> continuation sheets at	tached	.		Sub	tota	l ≻	\$ 81,360.00
to Schedule of Creditors Holding Unsecured Nonpriority Claims				Т	otal	>	\$

Case 09-20851

Document

Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Page 30 of 84

B6F (Official Form 6F) (12/07) - Cont.

In re Kid Pronghorn Enterprises, Inc

Debtor

Case No. _

(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Glen's Machine Shop, Inc P O Box 637 Mills, WY 82644	x		Incurred: 7/6/08 Consideration: Repairs				2,100.00
ACCOUNT NO. 3693 Globalstar USA P O Box 30519 Los Angeles, CA 90030	x		Incurred: 5/10/09 Consideration: Satellite Cell Service			x	285.00
ACCOUNT NO. Honnen Equipment Company 5217 S. Douglas Hwy Gillette, WY 82718	x		Incurred: 4/20/08 Consideration: Equipment rental				54,250.00
ACCOUNT NO. 1123 Howard Supply Company P O Box 678186 Dallas, TX 75267-8186	x		Incurred: 1/9/09 Consideration: Parts				4,175.00
ACCOUNT NO. Kurt E. Taylor 28 Prairie Spring Lane Sheridan, WY 82801							Notice Only
Sheet no. 4 of 6 continuation sheets attached to Schedule of Creditors Holding Unsecured Subtotal ➤ Nonpriority Claims Total ➤ (Use only on last page of the completed Schedule F.)						>	\$ 60,810.00 \$

Document

Entered 08/30/09 21:19:09 Desc Main Filed 08/30/09 Page 31 of 84

B6F (Official Form 6F) (12/07) - Cont.

In re Kid Pronghorn Enterprises, Inc

Debtor

Case No. _

(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 2314 McJunkin Red Man Corp P O Box 640300 Pittsburgh, PA 15264-0300	x		Incurred: 1/9/08 Consideration: Parts				2,708.75
ACCOUNT NO. 3245 Mullinax Construction Supply P O Box 2044 Sheridan, WY 82801	x		Incurred: 3/25/08 Consideration: Materials				2,350.00
ACCOUNT NO. 5617 NAPA 2018 Coffeen Ave Sheridan, WY 82801	x		Incurred: 2/24/09 Consideration: Parts				1,000.00
ACCOUNT NO. 133 Powder River Power P O Box 6179 Sheridan, WY 82801	x		Incurred: 1/31/08 Consideration: Parts				5,410.00
ACCOUNT NO. Pronghorn Drilling, Inc P O Box 805 Glenrock, WY 82637	x		Incurred: 7/25/07 Consideration: Water hauling				8,560.00
Sheet no. 5 of 6 continuation sheets attached Subtotal ➤ to Schedule of Creditors Holding Unsecured Total ➤						\$ 20,028.75 \$	

Document

Entered 08/30/09 21:19:09 Desc Main Filed 08/30/09 Page 32 of 84

B6F (Official Form 6F) (12/07) - Cont.

In re Kid Pronghorn Enterprises, Inc

Debtor

Case No.

(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Incurred: 10/15/08				
Reed Hycalog 816 N Circle Dr Casper, WY 82601	X		Consideration: repairs on PDC Bits				6,125.00
ACCOUNT NO. 0000			Incurred: 2/29/08			┝	
Rocky Mountain Bit/Moab Bit & Tool Co P O Box 817 Moab, UT 84532	x		Consideration: Bit rental				4,150.00
ACCOUNT NO. 9050			Incurred: 1/5/09				
Wells Fargo Business Direct P O Box 348750 Sacramento, CA 95834	x		Consideration: Credit card debt				76,000.00
ACCOUNT NO. 3449			Incurred: 5/29/09			┝	
Wyoming Machinery Company P O Box 2335 Casper, WY 82602	X		Consideration: Equipment rental				66,510.00
ACCOUNT NO.							
Sheet no. <u>6</u> of <u>6</u> continuation sheets attached Subtotal Subtotal						\$ 152,785.00	
Nonpriority Claims Total > (Use only on last page of the completed Schedule E.)						\$ 485,691.75	

In re

Doc 1	Filed 0
	Docu

08/30/09	Entered 08/30/09 21:19:09	Desc Main
ument	Page 33 of 84	

Kid Pronghorn Enterprises, Inc

Debtor

Case No.

(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
Chopping Motor Lease, Inc 1555 N. Federal Blvd Riverton, WY 82501	11 Equipment Leases
COP Construction, LLC P O Box 20913 Billings, MT 59104	10% retainage on Dirt Project
Pronghorn Drilling, Inc P O Box 805 Glenrock, WY 82637	Machinery Lease
Butler Machinery Company Mr. Troy DeWitz P O BOx 9559 Fargo, ND 58106-9559	Equipment rental
John Deere Credit P O Box 650215 Dallas, TX 75265-0215	Machinery lease
Wells Fargo Equipment Finance 733 Marquette Ave, Suite 700 Minneapolis, MN 55402	Equipment lease

 $\begin{array}{c} Case \ 09\text{-}20851 \\ \textbf{B6H} \ (\textbf{Official Form 6H}) \ (12/07) \end{array} Doc \ 1 \end{array}$

In re Kid Pronghorn Enterprises, Inc

Debtor

Case No.

(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Kurt E. Taylor 28 Prairie Spring Lane Sheridan, WY 82801	All Creditors listed

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main

Document Page 35 of 84

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court

District of Wyoming

Kid Pronghorn Enterprises, Inc

In re

Debtor

Case No.

11

Chapter

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A – Real Property	YES	1	\$ 0.00		
B – Personal Property	YES	4	\$ 2,619,876.03		
C – Property Claimed as exempt	YES	1			
D – Creditors Holding Secured Claims	YES	4		\$ 875,517.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	7		\$ 485,691.75	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	NO	0			\$ 0.00
J - Current Expenditures of Individual Debtors(s)	NO	0			\$ 0.00
TO	TAL	21	\$ 2,619,876.03	\$ 1,361,208.75	

Official Sectors 109-2009 1200 121:19:09 Desc Main United States Bankruptcy Court District of Wyoming

Kid Pronghorn Enterprises, Inc In re

Case No.

Debtor

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. \$101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

 \square Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ N.A.
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ N.A.
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ N.A.
Student Loan Obligations (from Schedule F)	\$ N.A.
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ N.A.
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ N.A.
TOTAL	\$ N.A.

State the Following:

Average Income (from Schedule I, Line 16)	\$ N.A.
Average Expenses (from Schedule J, Line 18)	\$ N.A.
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ N.A.

State the Following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ N.A.
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ N.A.	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ N.A.
4. Total from Schedule F		\$ N.A.
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ N.A.

B6 (Official IGase-Decaeson) (12000 1

Filed 08/30/09	Entered 08/30/09 21:19:09	Desc Main
Document	Page 37 of 84	

Kid Pronghorn Enterprises, Inc

In re

Case No. ___

Debtor

(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of ______ sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date _____

Date _____

(Joint Debtor, if any)

Debtor:

(Joint Debtor, II

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address X

Signature of Bankruptcy Petition Preparer

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the <u>President</u> [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the <u>Kid Pronghorn Enterprises</u>, Inc____ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of <u>23</u> sheets (*total shown on summary page plus 1*), and that they are true and correct to the best of my knowledge, information, and belief.

Date	8/30/2009

Signature: /s/ Kurt E. Taylor

KURT E. TAYLOR

[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Social Security No.

(Required by 11 U.S.C. § 110.)

Signature:

Signature: _

Date

Case 09-20851

Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main UNITED STATES BASK OFTCY COURT

District of Wyoming

In Re Kid Pronghorn Enterprises, Inc

Case No. _____(if known)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT		SOURCE
2009	624,942.95	Business	
2008	2,508,366.45	Business	
2007	3,046,436.61	Business	

None

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Document Page 39 of 84

2. Income other than from employment or operation of business

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

None **3. Payments to creditors**

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF	AMOUNT	AMOUNT STILL
	PAYMENTS	PAID	OWING

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*)any payments that were made to a creditor on account of a domestic support obligation or as part of an alternativerepayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
Wells Fargo Equipment Finance 733 Marquette Ave Suite 700 Minneapolis, MN 55402	Monthly	\$3,667.21	\$52,000
Reed Hycalog 816 N Circle Dr Casper, WY 82601	Monthly	\$2,000	\$5,450
First Interstate Bank 1613 Coffeen Ave Sheridan, WY 82801	Monthly	\$1,336.84	\$14,650
First Interstate Bank Sugerland Branch P O Box 6499 Sheridan 82801	Monthly	\$1,175.48	\$16,500

None

None

 \boxtimes

Case 09-20851 Doc 7	Filed 08/30/09 Document	Entered 08/30/09 21:19: Page 40 of 84	09 Desc Main
NAME AND ADDRESS OF CREDIT AND RELATIONSHIP TO DEBTC			AMOUNT STILL OWING
First Interstate Bank Indirect Buy Center P O Box 31295 Billings, MT 59107	Monthly	\$624.42	\$14,512.
First Interstate Bank Indirect Buy Center P O Box 31295 Billings, MT 59107	Monthly	\$669.22	\$12,288
West Park c/o Harker Mellinger CPAs, LLC 1470 Sugarland Dr Suite 1 Sheridan, WY 82801	Monthly (App	x) \$2,416.44	\$3,500
Wells Fargo Equipment Finance 733 Marquette Ave, Suite 700 Minneapolis, MN 55402	Monthly (App	x) \$19,377.58	\$329,500
Alltel P O Box 79033 Phoenix, AZ 85062	Monthly	\$1,856.42 (Appx	\$1,590
Wells Fargo Bank 234 E. 1st Street Casper, WY 82601	Monthly	\$4,667.74	0
Trendwest 3655 131 St. Sbr Dr. 4th Floor Bellevue, WA 98006	Monthly	\$2,513.76	\$71,375
Citi Capital Commercial Corp P O Box 168647 Irving, TX 75016-8647	Monthly	\$2,685.72	\$39,000

None

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR DATES OF PAYMENTS AMOUNT PAID

AMOUNT STILL OWING

Entered 08/30/09 21:19:09 Desc Main Case 09-20851 Filed 08/30/09 Doc 1 Page 41 of 84 Document

4. Suits and administrative proceedings, executions, garnishments and attachments

None List all suits and administrative proceedings to which the debtor is or was a party within one year immediately a. preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Mark A. Turner, dba Alvarado Bit Service vs Kid Pronghorn Enterprises, Inc CV-2008-381	Civil Action	District Court of the 4th Judical Dist County of Sheridan, WY	Pending
Farmer's CO-OP Oil Company, Inc vs Kid Pronghorn Enterprises, and Kurt E. Taylor CV-2009-223	Civil Action	Distric Court of the 4th Judical Dist County of Sheridan, WY	Pending
Big Horn Hydraulics, Inc vs Kid Pronghorn Enterprises, Inc CV-2009-190	Civil Action	District Court of the 4th Judical Dist. County of Sheridan, WY	Pending
Butler Machinery Company, and North Centeral Rental & Leasing, LLC, vs Kid Pronghorn Enterprises, Inc. CV-2008-263	Civil Action	District Court of the 4th Judical Dist County of Sheridan, WY	Judgment
Powder River v. Kid Pringhorn Drilling SC 2009 0000126	Small Claims	Circuit Court Sheridan County	Pending

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Page 42 of 84 Document

None \boxtimes

Describe all property that has been attached, garnished or seized under any legal or equitable process within b. one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. \square (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND	DATE OF REPOSESSION,	DESCRIPTION AND
ADDRESS OF	FORECLOSURE SALE,	VALUE OF PROPERTY
CREDITOR OR SELLER	TRANSFER OR RETURN	
	,	٧A

6. Assignments and Receiverships

None Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding a. the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
ASSIGNEE		OK SETTLEMENT

None \boxtimes

 \boxtimes

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF **CUSTODIAN**

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF PROPERTY

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Document Page 43 of 84

7. Gifts

None \boxtimes

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND	RELATIONSHIP	DATE OF	DESCRIPTION AND
ADDRESS OF	TO DEBTOR, IF ANY	GIFT	VALUE OF GIFT
PERSON OR ORGANIZATION			

8. Losses

None \boxtimes

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION	DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS	DATE OF
AND VALUE	WAS COVERED IN WHOLE OR IN PART BY	LOSS
OF PROPERTY	INSURANCE, GIVE PARTICULARS	

9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMEN NAME OF PAYOR OTHER THAN DEBT	IF DESCRIPTION AND
Paul Hunter 2616 Central Avenue Cheyenne, WY 82001	6/12/09	Retainer \$7,500
of the debtor, transferred either of this case. (Married debtors	er absolutely or as security within t s filing under chapter 12 or chapte	he ordinary course of the business or financial affairs two years immediately preceding the commencement or 13 must include transfers by either or both spouses parated and a joint petition is not filed.)
NAME AND ADDRESS OF TRAN RELATIONSHIP TO DEBT	·	TE DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

Pinnacle Gas Resources Sheridan, WY Relationship: None

5/09

Water Truck \$50,000

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Document Page 44 of 84

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND	TYPE OF ACCOUNT, LAST FOUR	AMOUNT AND
ADDRESS OF	DIGITS OF ACCOUNT NUMBER,	DATE OF SALE
INSTITUTION	AND AMOUNT OF FINAL BALANCE	OR CLOSING

12. Safe deposit boxes

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND	NAMES AND ADDRESSES OF	DESCRIPTION OF	DATE OF
ADDRESS OF BANK	THOSE WITH ACCESS TO BOX	CONTENTS	TRANSFER OR
OR OTHER DEPOSITORY	OR DEPOSITORY		SURRENDER, IF ANY

13. Setoffs

None

None

 \boxtimes

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE	AMOUNT
	OF	OF
	SETOFF	SETOFF

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Document Page 45 of 84

14. Property held for another person

List all property owned by another person that the debtor holds or controls.

NAME ANDDESCRIPTION ANDLOCATION OF PROPERTYADDRESS OF OWNERVALUE OF PROPERTY

15. Prior address of debtor

If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None \boxtimes

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME	NAME AND ADDRESS	DATE OF	ENVIRONMENTAL
AND ADDRESS	OF GOVERNMENTAL UNIT	NOTICE	LAW

None

None

 \boxtimes

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Document Page 46 of 84

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME NAME AND ADDRESS DATE OF ENVIRONMENTAL AND ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

 \boxtimes

None

None

None

Γι

NAME AND ADDRESS OF GOVERNMENTAL UNIT DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
Kid Pronghorn Enterprises, Inc	83-0333188	28 Prairie Spring Lane Sheridan, WY 82801	Oil and Gas Drilling Drilling Services	1/3/01 to present

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME

ADDRESS

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Document Page 47 of 84

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within the six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or otherwise self-employed.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

	19. Books, record and fin	ancial statements			
None	a. List all bookkeepers and accountants who within the two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.				
NAME /	AND ADDRESS	DA	TES SERVICES RENDERED		
41 East H	lch, CPA, LCC Burkitt 1, WY 82801		1/3/01 to present		
		dividuals who within the two years immediately f account and records, or prepared a financial sta			
	NAME	ADDRESS	DATES SERVICES RENDEREI		
Jennifer 1	Edgell	Overland Solutions Inc 1820 South 56th St. West	1/17/08		
William	Chris Briggs	Billings, MT 59106 State of Wyoming Dept of Audit	4/24/08		
None	c. List all firms or inc of account and records o	122 West 25th St. lividuals who at the time of the commencement f the debtor. If any of the books of account and r	of this case were in possession of the books records are not available, explain.		
	NAME	ADDRESS			
Cindy Pil	lch, CPA , LCC	41 East Burkitt Sheridan, WY 82801			

Entered 08/30/09 21:19:09 Case 09-20851 Filed 08/30/09 Desc Main Doc 1 Document Page 48 of 84

None

d.

List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the two years immediately preceding the commencement of this case by the debtor.

NAME AND ADDRESS	DATE ISSUED
Wells Fargo Bank 234 East 1st Street Casper, WY 82601	2/15/09
First Interstate Bank 1613 Coffeen Ave Sheridan, WY 82801	2/10/09
Wells Fargo Equipment Finance 733 Marquette Ave, Suite 700 Minneapolis, MN 55402	2/15/09

20. Inventories

List the dates of the last two inventories taken of your property, the name of the person who supervised the a. taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)
2/25/08	Kurt E. Taylor	\$2,753,032 (Rigs, Trucks and Equipment)
3/5/08	Kurt E. Taylor	\$91,352 (Supplies, Bits, Tools and Parts)
5/26/09	Kurt E. Taylor	\$2,330.155 (Rigs, Trucks and Equipment)
5/29/09	Kurt E. Taylor	\$85,990 (Supplies, Bits, Tools and Parts)

None

b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY	NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS
2/25/07	Kurt E. Taylor 28 Prairie Spring Lane Sheridan, WY 82801
3/5/07	Kurt E. Taylor 28 Prairie Spring Lane Sheridan, WY 82801
5/26/09	Kurt E. Taylor 28 Prairie Spring Lane Sheridan, WY 82801

None

(Case 09-20851 Doc 1	Filed 08/30/09 Document	Entered 08 Page 49 of	3/30/09 21:19:09 84	Desc Main
	DATE OF INVENTORY			D ADDRESSES OF CUST INVENTORY RECORDS	
	5/29/09		Kurt E. Taylo 28 Prairie Sp Sheridan, W	oring Lane	
	21. Current Partners, Officers, D	irectors and Shareholders	5		
None	a. If the debtor is a partnershi	p, list the nature and perc	centage of partners	hip interest of each membe	or of the partnership.
	NAME AND ADDRESS	NATURE OF INT	EREST	PERCENTAGE O	F INTEREST
None	b. If the debtor is a corporation or indirectly owns, controls, or h				
	NAME AND ADDRESS	TITLE		NATURE AND PER STOCK OWN	
	Kurt E. Taylor 28 Prairie Spring Lane Sheridan, WY 82801	President		100% Stock Ownership	
	22. Former partners, officers, di	rectors and shareholders			
None	a. If the debtor is a partnership preceding the commencement of		withdrew from the	e partnership within one ye	ar immediately
	NAME	ADDRES	SS	DATE OF WITH	DRAWAL
None	 b. If the debtor is a corporat within one year immediately pre- 			ationship with the corporat	ion terminated
	NAME AND ADDRESS	TĽ	ГLE	DATE OF TERM	IINATION
	23. Withdrawals from a partner	ship or distribution by a c	orporation		
None	If the debtor is a partnership including compensation in any during one year immediately pre	form, bonuses, loans, sto	ck redemptions, c		
	NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND OF WITHD		AMOUNT OF DESCRIPTION OF PROI	AND VALUE
	Kurt E. Taylor 28 Prairie Spring Lane Sheridan, WY 82801 Relationship: Officer	Wages Appx \$ provided comp			

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Document Page 50 of 84

24. Tax Consolidation Group

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the six-year period immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the six-year period immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

[If completed on behalf of a partnership or corporation]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information and belief.

8/30/2009

Date

Signature

/s/ Kurt E. Taylor

KURT E. TAYLOR, President

Print Name and Title

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Document Page 51 of 84

0 continuation sheets attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. \$152 and 3571

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. § 110(b), 110(b), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110(c).)

Date

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

Х

Signature of Bankruptcy Petition Preparer

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Document Page 52 of 84

A-Plus Services, LLC P O Box 7280 Sheridan, WY 82801

Allen Inspection Services P O Box 583 Mills, WY 82644

Alltel P O Box 79033 Phoenix, AZ 85062

Alvarado Bit Service 5729 E. Hwy 67 Alvarado, TX 76009

Anderson Seismograph Bit P O box 313 2589 N. Salt Creek Hwy Casper, WY 82602

Armstrong Machine Company 10SW 7th St Pocahontas, IA 50574

Bank of America P O Box 17309 Baltimore, MD 21297

Big Horn Hydraulics 507 N. Burma Gillette, WY 82716

Butler Machinery Company Mr. Troy DeWitz P O BOx 9559 Fargo, ND 58106-9559

Butler Machinery Company Mr. Troy DeWitz P O BOx 9559 Fargo, ND 58106-9559

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Document Page 53 of 84

Chase Card Member P O Box 94014 Palatine, IL 60094-4014

Chopping Motor Lease, Inc 1555 N. Federal Blvd Riverton, WY 82501

Christensen Enterprises P O Box 219 Ranchester, WY 82830

Citibank P O Box 6309 The Lakes, NV 88901-6309

Citibank P O Box 6411 The Lakes, NV 88901-6411

CitiFinancial Retail Services P O Box 22060 Tempe, AZ 85285-2060

COP Construction, LLC P O Box 20913 Billings, MT 59104

COP Construction, LLC P O Box 20913 Billings, MT 59104

Discover P O Box 30395 Salt Lake City, UT 84130

Economy Bit Service, Inc P O Box 50368 Casper, WY 82605

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Document Page 54 of 84

Farmer's CO-OP Oil Company P O Box 766 Sheridan, WY 82801

First Collection Services 10925 Otter Creek E. Blvd Mabelvale, AR 72103

First Interstate 104 South Wolcott P O Box 40 Casper, WY 82602-0040

First Interstate Bank 1613 Coffeen Ave Sheridan, WY 82801

First Interstate Bank 1613 Coffeen Ave Sheridan, WY 82801

First Interstate Bank 1613 Coffeen Ave Sheridan, WY 82801

First Interstate Bank 1613 Coffeen Ave Sheridan, WY 82801

First Interstate Bank 1613 Coffeen Ave Sheridan, WY 82801

First Interstate Bank P O Box 30918 Billings, MT 59116

First Interstate Bank P O Box 30918 Billings, MT 59116

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Document Page 55 of 84

Fourth Judicial District Court Sheridan County Courthouse 224 South Main Street, Suite Bl1 Sheridan, WY 82801

Gasses Plus P O Box 789 Gillette, WY 82717-0789

GE Capital Corp P O Box 62291 Carol Stream, IL 60197-6729

Glen's Machine Shop, Inc P O Box 637 Mills, WY 82644

Globalstar USA P O Box 30519 Los Angeles, CA 90030

Honnen Equipment Company 5217 S. Douglas Hwy Gillette, WY 82718

Howard Supply Company P O Box 678186 Dallas, TX 75267-8186

John Deere Credit P O Box 650215 Dallas, TX 75265-0215

John Deere Credit P O Box 650215 Dallas, TX 75265-0215

Kurt E. Taylor 28 Prairie Spring Lane Sheridan, WY 82801 Kurt E. Taylor 28 Prairie Spring Lane Sheridan, WY 82801

McJunkin Red Man Corp P O Box 640300 Pittsburgh, PA 15264-0300

Mullinax Construction Supply P O Box 2044 Sheridan, WY 82801

NAPA 2018 Coffeen Ave Sheridan, WY 82801

Powder River Power P O Box 6179 Sheridan, WY 82801

Pronghorn Drilling, Inc P O Box 805 Glenrock, WY 82637

Pronghorn Drilling, Inc P O Box 805 Glenrock, WY 82637

Pronghorn Drilling, Inc P O Box 805 Glenrock, WY 82637

Pronghorn Drilling, Inc P O Box 805 Glenrock, WY 82637

Reed Hycalog 816 N Circle Dr Casper, WY 82601

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Document Page 57 of 84

Rocky Mountain Bit/Moab Bit & Tool Co P O Box 817 Moab, UT 84532

Wells Fargo Bid Loan Accounting WY 10548 Mac U1851-104 P O Box 7666 Boise, ID 83707-1666

Wells Fargo Business Direct P O Box 348750 Sacramento, CA 95834

Wells Fargo Equipment Finance 733 Marquette Ave Suite 700 Minneapolis, MN 55402

Wells Fargo Equipment Finance 733 Marquette Ave, Suite 700 Minneapolis, MN 55402

Wells Fargo Equipment Finance 733 Marquette Ave, Suite 700 Minneapolis, MN 55402

Wyoming Machinery Company P O Box 2335 Casper, WY 82602

Case 09-20851 Doc 1_{UNI}Filed 08/20/09 KREptered 08/20/09 21:19:09 Desc Main Document of WP age 58 of 84

In re <u>Kid Pronghorn Ente</u>	erprises, Inc Debtor	, Case No. Chapter	11	
Holder of Security	List of	Equity Security Holders	Type of Interest	
Kurt E. Taylor 28 Prairie Spring Lane Sheridan, WY 82801		100.00	Shareholder/Director	

Paul Hunter Attorney at Law 2616 Central Avenue Cheyenne, Wyoming 82001 307-637-0212 307-637-0262 (Fax) attypaulhunter@prodigy.net

IN THE UNITED STATES BANKRUPTCY COURT

FOR THE DISTRICT OF WYOMING

In re:)	
)	Case No. 09-
Kid Pronghorn Enterprises, Inc.)	Chapter 11
a Wyoming Corporation,)	-
)	
Debtor.)	

RESOLUTION OF DIRECTORS

The undersigned officer of the corporation certifies that the following is a true and correct representation of the resolution of the directors meeting:

A directors meeting was held on June 20, 2009.

BE IT RESOLVED: that Kid Pronghorn Enterprises, Inc. is hereby authorized and directed to file its petition in Bankruptcy under Chapter 11 of the Bankruptcy Code.

BE IT RESOLVED that Kurt E. Taylor, President, is authorized to execute all pleadings necessary documents; retain counsel, and further charged with the duties of communicating with counsel for purposes of the bankruptcy proceedings and shall be responsible for the actions necessary herein.

Directors Present:

Dated: June 26, 2009

Respectfully submitted, Kid Pronghorn Enterprises, Inc. By:

1

Case 09-20851 Doc 1

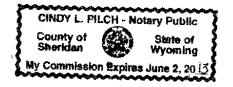
1 Filed 08/30/09 Document

UUV 1sl Kurt E. Taylor President

STATE OF Wyoming COUNTY OF Sheridan

Subscribed, sworn to and acknowledged before me by Kurt E. Taylor this 26^{47} day of May; 2009.

Viere



1st_ Cindy- X Pala

Commission Expires 6-2-2013

ţ

2

		Case	99-208		ered 08/30/09 21	:19:0	09 Des	c Main
For	Form 1120S Document Page 61 of 84 U.S. Income Tax Return for an S Corporation							OMB No. 1545-0130
1 01	,,,,			 U.S. Income Tax Return for Do not file this form unless the cor 		n		
Dec	artmer	nt of the Treasury		attaching Form 2553 to elect to be	an S corporation.			2007
		Idar year 2007 or tax	k vear begin		200115.	·		<u> </u>
<u> </u>		tion effective date		Name		σ	Employer ide	entification number
		/01/01	Use IRS	KIDPRONGHORN ENTERPRISE	S. INC.		83-033	
8		ess activity code	label.	Number, street, and room or suite no. If a P.O. box, see		ΤΕ	Date Incorport	
		er (see instructions)	Other- wise,	······································				
	21	1110	print or	28 PRAIRIE SPRING LANE			1/01/	2001
ç	Check	kifSch. M-3	type.	City or town, state, and ZIP code		F	Total assets (see instructions)
	attact	ned 🛄		SHERIDAN WY	82801			61,920
G	is the	e corporation electing	g to be an S	corporation beginning with this tax year?	Yes X No If Yes	," atta	ch Form 2553	s if not already filed
н	Chec	ck if: (1) 🦳 Final r	eturn (2)	Name change (3) Address change	Survey, And			"
		(4) Amena	ded return	(5) Selection termination (or revocation			
1	Ente	r the number of shar	reholders in	the corporation at the end of the tax year	1 <u></u>	4. 7. 4. 7. 1	• •	▶ <u>1</u>
Са	ution.	Include only trade on		income and expenses on lines 1a through 21. See	the instructions for more	inforn	nation.	·····
	1a	Gross receipts or sales	3,	269, 624 b Less returns and allowances	<	: Bal 🕨	<u>1c</u>	3,269,624
ø	2	Cost of goods sold	(Schedule /	λ, line 8)	* * * * > * * * * * * * * * * * * * * *	* * * * *	2	1,091,284
Income	3	Gross profit. Subtra	act line 2 fro	m line 1c			3	2,178,340
č	4	Net gain (loss) from	n Form 4797	, Part II, line 17 (attach Form 4797)	< = = + + + + + + + + + + + + + + + + +			5,852
-	5	Other income (loss)) (see instru	r, Part II, line 17 (attach Form 4797) ctionsattach statement)	See Stmt	1	5	7,450
	6	Total income (loss). Add lines	3 through 5	<u></u>	<u></u>	6	2,191,642
_	7	Compensation of of	ficers	,	*		7	<u> </u>
ons)	8	Salaries and wages	(less emplo	pyment credits),				<u> </u>
ltati	9	Repairs and mainte	nance		****		9	315,166
(see instructions for limitations)	10	Bad debts			* * • • * * • • • • • • • • • • • • • •		<u>10</u>	
S S	11	Rents				- • • • •	11	215,054
<u>i</u>	12	Taxes and licenses		*****			12	<u> </u>
and of	13							91,288
e ilie	14	Depreciation not cla	aimed on Sc	hedule A or elsewhere on retum (attach Form 456	2)		14	400,383
(SO	15	Depletion (Do not d	educt oil a	nd gas depletion.)			15	
SU	16							1,466
eductions	17	Pension, profit-shar	rin <mark>g, etc.,</mark> pla	ans , ,	****		17	
- Ö	18	Employee benefit p	rograms	nent)			18	6,889
ed	19	Other deductions (a	ittach stater	nent)	See Stm	ţ,	19	261,394
Δ	20	Total deductions. /	Add lines 7	through 19			20	2,320,252
	21			ss). Subtract line 20 from line 6		<u></u>	21	-128,610
				recapture tax (see instructions)				
Ø	b	Tax from Schedule	•	· · · · · · · · · · · · · · · · · · ·				
ä	c			ons for additional taxes)			<u>22c</u>	
Payments	238			and 2006 overpayment credited to 2007	23a			
,ay	b	Tax deposited with		an adda ala Tanan 4400	23b 23c			
	I			els (attach Form 4136)			23d	
Tax and	1	Add lines 23a throu		ructions). Check if Form 2220 is attached				·······
X	24 25			naller than the total of lines 220 is attached		► 1	24	
F	1			•		, 	26	
	26 27	•••		ger than the total of lines 22c and 24, enter amound the total of lines 22c and 24, enter amound the tax	Refur			
	<u>x1</u>							eturn with the preparer
¢	igл	and to the best of my	knowledge an	a that I have examined this return, including accompanying nd belief, it is true, correct, anscomplete. Declaration of pr preparer has any providing:	eparer (other than taxpayer)	•	nica discussi una re below (see instructi	
н	ere		(44712781 70) \$\$\$380Q(proparate time any analysis.			NOW TOO SOLUTE	
11	~ : U					"T"#!-	·····	
		Signature of offic				Title Check	*	Preparer's SSN or PTIN
p	aid	Preparer's			أسمد سيدم أ		n Nevolar	Preparers 55N 07P1N P00721570
		rer's Firm's name	r a tor	CANBY L PILCH, CPA, LLC		oon-eit		3-0328701
	se Ö		e (or employed),	41 E Burkitt St	۲ ۱۹۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ ۱۹۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰ - ۲۰۰۰		Phone #	
9	~~ V	address, an	• • •	Sheridan, WY	82801-630 <u>1</u>			-674-7491
		augress, au			<u> </u>		1 201	-074-7491 Farm 11208 (2007

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

.

ł

Form	<u>1120S</u>	Case 09-20851 Doc 1 Filed 08/30/09 Enter <u>KIDPRONGHORN ENTERPRIOR NC Page 6</u>	ed 08/30/09 21:19:09 52 3 fr 8 4 3 3 1 8 8) Des	c Main Page 2			
	edule		۱	·				
1	invento	ry at beginning of year		1				
2	Purcha			2	<u>337,796</u>			
3	Cost of	labor		3				
4	Additio	nal section 263A costs (attach statement)		4				
5	Other of	osts (attach statement)	Stmt 3	5	753,488			
6	Total.	Add lines 1 through 5		6	1,091,284			
7	Invento	ry at end of year		7				
8		f goods sold. Subtract line 7 from line 6. Enter here and on page 1, line 2	••••••••••••	8	1,091,284			
9a		all methods used for valuing closing inventory: (i) X Cost as described in R						
	(ii) [Lower of cost or market as described in Regulations section 1.471-4						
		Other (Specify method used and attach explanation.)						
ь		if there was a writedown of subnormal goods as described in Regulations section	n 1 471-27c)	• • • • • • • •	▶ □			
č		if the LIFO inventory method was adopted this tax year for any goods (if checked						
ď		IFO inventory method was used for this tax year, enter percentage (or amounts)			· · · · · · · · · · · · · · · · · · ·			
Q			-	9d				
-			······································		Yes X No			
e		erty is produced or acquired for resale, do the rules of section 263A apply to the						
f		ere any change in determining quantities, cost, or valuations between opening a	nd closing inventory?	• « « « » н « » «	Yes X No			
8212		" attach explanation.	Av					
Laboration of the second second second		B Other Information (see instructions)			Yes No			
1		accounting method: a X Cash b Accrual c Other (sp	secity) 🕨	• • • • • • • • • • •	[A. [A.]			
2		e instructions and enter the:						
		ness activity DRILLING b Product or service						
3		end of the tax year, did the corporation own, directly or indirectly, 50% or more of						
	corporation? (For rules of attribution, see section 267(c).) If "Yes," attach a statement showing: (a) name and employer							
	identifi	cation number (EIN), (b) percentage owned, and (c) if 100% owned, was a QSub	election made?		X			
4								
		ction?						
5	Check	this box if the corporation issued publicly offered debt instruments with original is	ssue discount		. 🕨 🗌 🔛			
	If chec	ked, the corporation may have to file Form 8281, Information Return for Publicly	Offered Original Issue Discoun	t				
	Instrur	nents.						
6	if the c	orporation: (a) was a C corporation before it elected to be an S corporation or th	e corporation acquired an					
		with a basis determined by reference to its basis (or the basis of any other proper						
		oration and (b) has net unrealized built-in gain (defined in section 1374(d)(1)) in						
		gain from prior years, enter the net unrealized built-in gain reduced by net recog	*					
	years							
7		he accumulated earnings and profits of the corporation at the end of the tax year						
8		e corporation's total receipts (see instructions) for the tax year and its total asset	······································					
•		an \$250,0007 If "Yes," the corporation is not required to complete Schedules L a			X			
Sch	edule	Charachaldanal Day Data Ohana Marra			Total amount			
<u></u>	1	Ordinary business income (loss) (page 1, line 21)		1	-128,610			
	2	Net rental real estate income (loss) (attach Form 8825)		2				
	1		3a					
	t			-				
6	c A	Other net rental income (loss). Subtract line 3b from line 3a			180			
Ë	4	Interest income			100			
Income (Loss)	5	Dividends: a Ordinary dividends		5a				
Ň		b Qualified dividends	<u> 50 </u>					
ř	6	Royalties						
	7	Net short-term capital gain (loss) (attach Schedule D (Form 1120S))						
	8a			8a	2,410			
	t	Collectibles (28%) gain (loss)	8b					
	6	Unrecaptured section 1250 gain (attach statement)	8c					
	9	Net section 1231 gain (loss) (attach Form 4797)		9				
	10	Other income (loss) (see instructions)	Stmt 4	10	155			
					14000			

Sam	1	4	2	۵S	Ľ	(2007)
rom.	ł		÷.	υ.	,	12007

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main

		2007) KIDPRONGHORN ENTERPROSEGNENTINC Page 63805 84333188 Shareholders' Pro Rata Share Items (continued)]	Page : Total amount
	11	Section 179 deduction (attach Form 4562)	11	
	12a	Contributions Stmt 5	12a	4,085
	b	Investment interest expense	12b	
		Section 59(e)(2) expenditures (1) Type > (2) Amount >	12c(2)	
		Other deductions (see instructions)	12d	6,703
		Low-income housing credit (section 42(j)(5))	13a	
	b	Low-income housing credit (other)	13b	
{	c	Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	13c	
	d	Other rental real estate credits (see instructions) Type	13d	
	e	Other rental credits (see instructions) Type	13e	
[f	Credil for alcohol used as fuel (attach Form 6478)	13f	
1	a	Other credits (see instructions)	13g	
		Name of country or U.S. possession		
ĺ	h	Gross income from all sources	145	
	~	Gross income from all sources Gross income sourced at shareholder level	140	*.
	ç	Foreign gross income sourced at corporate level		
	4			
	u 	Passive category	14d	
	е 4	General category	14e	
Í	T	Other (attach statement)	14f	······
		Deductions allocated and apportioned at shareholder level		
ļ	g	Interest expense		
l	n	Other	14h	. <u></u>
		Deductions allocated and apportioned at corporate level to foreign source income		
ĺ	1	Passive category	<u>14i</u>	
	j	General category	<u>14j</u>	· · · · · · · · · · · · · · · · · · ·
	ĸ	Other (atlach statement)	14k	
Ì		Other information		
l	I	Total foreign taxes (check one): ► Paid Accrued	141	
	m	Reduction in taxes available for credit (attach statement)	<u>14m</u>	
		Other foreign tax information (attach statement)		
	15a	Post-1986 depreciation adjustment	<u>15a</u>	60,865
(AMT) Items	b	Adjusted gain or loss	15b	-1,15
Ē	¢	Depletion (other than oil and gas)	15c	
Ξ	d	Oil, gas, and geothermal properties-gross income	15d	
5	e	Oil, gas, and geothermal properties-deductions	15e	
	ť	Other AMT items (attach statement)	15f	
Basis	16a	Tax-exempt interest income	16a	
2	b	Other tax-exempt income	16b	
335	C	Nondeductible expenses	16c	3,54
-	d	Property distributions	16d	152,00
	e	Repayment of loans from shareholders	16e	
ő		Investment income	17a	18
nat	ь	Investment expenses	17b	
E o	¢	Dividend distributions paid from accumulated earnings and profits	17c	
Information	d	Other items and amounts (attach statement)		
5				
ciliation	18	Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right		
5	ļ	column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14l	18	-136,65
	~		<u></u>	Form 1120S (20

ł

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main

Form 11205 (2007) KIDPRONGHORN ENTERPROCEMENT IN Page 64 8584333188

Page 4

	edule L Balance Sheets per Books		of tax year		- ·	End of	tax year
_	Assets	<u>(a)</u>		(b)	<u>(c)</u>		
1	Cash			98,824		99 A.C.	27,045
2a	Trade notes and accounts receivable			A			
Ь	Less allowance for bad debts						
3	Inventories	A 10 10 10 10 10 10 10			8 8 8 8 8	1.44	
4	U.S. government obligations						
5	Tax-exempt securities (see instructions)			······		5 (A)	
5	Other current assels (attach statement) Stmt 8			20,296		1. MA	40,79
7	Loans to shareholders			3			77,78
8	Mortgage and real estate loans						
9	Other investments (attach statement) Stmt 9			25,835		e an	28,24
)a	Buildings and other depreciable assets	1,426,374			2,425		
Ь	Less accumulated depreciation	(<u>807,897</u>)		618,477	(1,202	2,475	1,223,48
a	Depletable assets						
b	Less accumulated depletion				(
2	Land (net of any amortization)						
3a	Intangible assets (amortizable only)	666				666	
b	Less accumulated amortization	(559		107	(606	
Ē	Other assets (attach statement) Stmt 10	`````		176,676	\		164,50
5	Total assets			940,215			1,561,92
	Liabilities and Shareholders' Equity			210/210			
5	Aponunto naunhio						
7	Mortgages, notes, bonds payable in less than 1 year			166,377			
3	Other current liabilities (ettach statement) Stmt 11			1,013	9992 IS 9949		1,35
, }	Lance form chambaldom			2,475			1,00
,)	*****************			424,555		94 G M C	1,506,97
	Mortgages, notes, bonds payable in 1 year or more	2020000	¥	424,000		8 C (1,300,97
1	Other liabilities (attach statement)			2 220			2,33
2	Capital stock			2,339 5,000		9-92 B	5,00
3	Additional paid-in capital					1.00	
4 5	Retained earnings Adjustments to shareholders'	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		338,456	1. 10 Core 10.		46,25
	Adjustments to shareholders' equity (attach statement)						
6	Less cost of treasury stock		<u> </u>	0 10 015		3098	
7 NG28	Total liabilities and shareholders' equity		LA CAL	940,215			1,561,92
	edule M-1 Reconciliation of Inco	• • •		,	· -		
	Note: Schedule M-3 required						ons
1	Net income (loss) per books	-140,202			*	ded	
2	Income included on Schedule K, lines 1, 2, 3c, 4,			hedule K, lines 1 thr			
	5a, 6, 7, 8a, 9, and 10, not recorded on books this		a Tax-e	xempt interest 💲			
	year (itemize):			*****		, , ,	
3	Expenses recorded on books this year not			ctions included o			
	included on Schedule K, lines 1 through 12		1 thr	ough 12 and 14L i	not charged agai	nst	
	and 14I (itemize):			income this year			
a	Depreciation \$		a Depr	eciation \$			
b	Travel and entertainment \$ 3,549						
		3,549	7 Add	Lana E and C			
4	Add lines 1 through 3	-136,653			(, line 18). Line 4 le	ss line 7	-136,65
. 224		lated Adjustments	Accoun	t. Other Adius	stments Acc	ount. a	
- 24	Hedule M-2 Analysis of Accumu Undistributed Taxat						••••••••••••••••••••••••••••••••••••••
		(a) Accumulated adjustments account		(b) Other ad accor	justments		Shareholdars' undistributed ble income previously taxed
1	Balance at beginning of tax year	320	,456				- - -
1		<u> </u>	1200				
2	Ordinary income from page 1, line 21	~	7 4 5				
3	Other additions Stmt 12		,745				
4	Loss from page 1, line 21		,610				
5	Other reductions Stmt 13		,337				
6	Combine lines 1 through 5		,254				
7	Distributions other than dividend distributions	152	,000				

152,000

46,254

Distributions other than dividend distributions Balance at end of tax year. Subtract line 7 from line 6 Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main 83-0333188 FBSC han State 9651584

Description	Amount
Other Income	\$ 7,450
Total	\$ 7,450

Description	 Amount
PROFESSIONAL FEES	\$ 16,038
BANK CHARGES	1,467
CONTRACT LABOR	3,570
OFFICE EXPENSE	10,134
TELEPHONE	20,264
UTILITIES	9,559
PAYROLL TAX EXPENSE	171,256
EMPLOYEE GOODWILL	7,068
SMALL TOOLS	7,010
FREIGHT	3,114
DUES AND SUBSCRIPTIONS	1,118
DRUG TESTING	6,979
TRAINING	220
Amortization	47
50% of Meals & Entertainment	 3,550
Total	\$ 261,394

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main 83-0333188 Pocument Stategy 800584

Description	 Amount
GAS & OIL	\$ 281,959
INSURANCE	117,753
EQUIPMENT LEASE	112,522
SUBSISTENCE	182,347
SUBCONTRACTOR	58,907
Total	\$ 753,488

	Description			mount
Sec	1231	Casualty/Theft	\$	155
	Tota	al	\$	155

83-0333188	Case 09-20851	Doc 1 Fittech	Stal/Statein ment Page 6	eh98/30/09 21 7 of 84	:19:09 Desc I	Main			
Statement 5 - Form 1120S, Page 3, Schedule K, Line 12a - Contributions									
Desc									
	Cash Contrib 50%	Cash <u>6 Contrib 30%</u>	Noncash Contrib 50%	Noncash Contrib 30%	Cap Gain Prop 30%	Cap Gain Prop 20%	Total		
VARIOUS									
	\$4,08	<u>5</u> \$	Ş	Ş	Ş	\$	\$ 4,085		
Total	\$4,08	5\$ <u>0</u>	\$	\$0	\$0	\$0	\$ <u>4,085</u>		

,

.

.

			Ua
83-0	333	11:	88
~~ ~	~~~		~~

Total

Interest from U.S. Obligations

Case 09-20851 Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main 8 Federation States 98 68 584

Description	/	Amount	
Shareholder Health Insurance	\$	6,703	
Total	\$	6,703	

6-7

Í

180

180

\$

\$

Deces 144	Beginning	End
	of Year	of Year
IMPLOYEE ADVANCE Total	\$ <u>20,296</u> \$20,296	\$ <u>40,793</u> \$40,793
IOLAI	\$ 20,296	\$40,793
Statement 9 - Form 11	20S, Page 4, Schedule L , Li	ne 9 - Other Investments
Description	Beginning of Year	End of Year
INVESTMENT IN MSDW	\$ 25,835	\$ 28,245
Total	\$ 25,835	\$ 28,245
Statement 10 - Form	n 1120S, Page 4, Schedule L,	Line 14 - Other Assets
Description	Beginning of Year	End of Year
LEASED EQUIPMENT	\$ 79,109	\$ 79,109
OTHER SHORT TERM LOANS	37,950	38,225
SECURITY DEPOSIT OTHER PROPERTY	2,890	1,390
PREPAID INTEREST	30,701 26,026	45,784
Total	\$ 176,676	\$ 164,508
istar	¢ <u> </u>	4 <u>1037500</u>
Statement 11 - Form 1120	S, Page 4, Schedule L, Line	18 - Other Current Liabilities
Description	Beginning of Year	End of Year
PAYROLL TAXES PAYABLE	\$ 910	\$ 1,354
INSURANCE PAYABLE	103	
Total	\$ 1,013	\$ 1,354
	······································	
Statement 12 - Form 11	120S, Page 4, Schedule M-2,	Line 3(a) - Other Additions
Statement 12 - Form 11 Description	120S, Page 4, Schedule M-2, Amount	Line 3(a) - Other Additions
		Line 3(a) - Other Additions
Description Interest Income Long-Term Cap Gain	Amount \$ 180 2,410	Line 3(a) - Other Additions
Description Interest Income Long-Term Cap Gain Other Income	Amount \$ 180 2,410 155	<u>Line 3(a) - Other Additions</u>
Description Interest Income Long-Term Cap Gain	Amount \$ 180 2,410	<u>Line 3(a) - Other Additions</u>

Statement 13 - Form 1120S, Page 4, Schedule M-2, Line 5(a) - Other Reductions							
Description		Amount					
Disallowed Entertainment Exp Charitable Contributions Shareholder Health Insurance	\$	3,549 4,085 6,703					
Total	\$	14,337					

j

Case 09-2085			Entered 08/30/		09 Des	c Main	
SCHEDULE D	Capital G	Jocument ains and Los	Page 71 of 84 ses and Built-II	ו Gains		OMB No. 1545-0130	
(Form 1120\$)	•		Form 1120S.			2007	
Department of the Treasury		-	· · · · · · ·			2007	
Internal Revenue Service		See Separa	te instructions.				
Name KID <u>PR</u> ONGHORN ENTER	DDTOTO TNC	4			-mployer iden 33-0333	tification number	
			eld One Year or Le	the second s		100	
(a) Description of property	(b) Date acquired	(c) Date sold		(e) Cos	stor	(f) Gain or (loss)	
(Example: 100 shares of Z Co.)	(mo., day, yr.)	(mo., day, yr.)	(d) Sales price	other basis (see instructions)		(Subtract (e) from (d))	
1						Lucyanharry Allininke Augunhar Allininka	
2 Short-term capital gain from installm	ent sales from Form	6252, line 26 or 37			2	······································	
3 Short-term capital gain or (loss) from		from Form 8824	• . • • • • • • • • • • • • • • • • • •				
4 Combine lines 1 through 3 in column		• • • • • • • • • • • • • • • • • • • •		*****			
5 Tax on short-term capital gain includ	led on line 21 below			<i>, . </i>	<u>5 (</u>		
6 Net short-term capital gain or (los							
Schedule K, line 7 or 10 Part II Long-Term Capita	Coinc and Loc	coc Accoto H	ald Moro Than One	Voor	6		
				(e) Co	stor		
 (a) Description of property (Example: 100 shares of Z Co.) 	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	other b	asis	(f) Gain or (loss) (Subtract (e) from (d))	
7							
8 Long-term capital gain from instalim	ent sales from Form	6252, line 26 or 37	······			amer,	
9 Long-term capital gain or (loss) from	i like-kind exchanges	from Form 8824					
10 Capital gain distributions			* * * • • • • • • • • • • • • • • • • •		10	2,410	
11 Combine lines 7 through 10 in colur	n n (f)		** • • • • • • • • • • • • • • • • • •			2,410	
12 Tax on long-term capital gain includ	ed on line 21 below				12 (· · · · · · · · · · · · · · · · · · ·	
13 Net long-term capital gain or (loss						~	
Schedule K, line 8a or 10	· · · · · · · · · · · · · · · · · · ·			<u>, , , , , , , , , , , , , , , , , , , </u>		2,410	
Part III Built-In Gains Tax				. <u> </u>			
14 Excess of recognized built-in gains		-		• • • • • • • • • • • •			
15 Taxable income (attach computation16 Net recognized built-in gain. Enter the		line 45 uplies 6 -1		, , , , , , , , , , , , , , , , , , ,	15		
17 Section 1374(b)(2) deduction 18 Subtract line 17 from line 16. If zero	Arlane antor B has				17		
19 Enter 35% of line 1820 Section 1374(b)(3) business credit	and minimum tax cree	tit canyforwards fro	m C cornoration veare	* 5 # 4 # 7 # 7 # 7 # 7 # 7 #	20		
21 Tax. Subtract line 20 from line 19 (i					···· •		
					21		
For Paperwork Reduction Act Notice,			<u></u>	<u></u>		ile D (Form 1120S) 2007	
					······································	· · · · · · · · · · · · · · · · · · ·	

Form	Case 4562	09-20851	De	led 08/30/09 En ଭୁନଙ୍ଖୀ ଅପର n a ଜିଙ୍କ ଜ	mortiza	Hon	9:09 I	Desc	Main OMB No. 1545-0172
	ment of the Treasury A Revenue Service			iding Information on	Listed P	roperty)			2007 Attachment c7
		<u> </u>	► See se	parate instructions. 🕨 A	ttach to you	ir tax return.			Sequence No. 0/
	(s) shown on return [DPRONGHORN]	ENTERPR	ISES, INC		.		Identifyin 83-0		
	ess or activity to which this								
	egular Depre								
Ka				erty Under Section f ty, complete Part V b		complete D	art l		
1				it for certain businesses				1	125,000
				e instructions)				2	
	Threshold cost of sect			a an an an		· · · · · · · · · · · · · · · · · · ·	i	3	500,000
4				ro or less, enter -0-	* * * * * * * * * * * * * *	, , , , , , , , , , , , , , , , , , ,		4	······································
5				r less, enter -0 If married filing				5	
·····	(a) Description o	f property	(b) Cos	t (business use	≥ only) (c) (Elected cost		
6			***						
7	Listed property. Enter	the amount fro	m line 29			7	<u> </u>		
8	Total elected cost of s	ection 179 proj	perty. Add arnouni	ts in column (c), lines 6 and	\$7			8	
9	I entauve deduction. E	inter the small	er of line 5 or line	8				9	
10	Carryover of disallowe	ed deduction fro	m line 13 of your	2006 Form 4562				10	
11	Business income limit	lation. Enter the	e smaller of busine	ess income (not less than z	ero) or line t	see instruction	F	11	
12 13				ut do not enter more than il		13		12	
A	: Do not use Part II or F			and 10, less line 12	ليسبب يشده	13		1000	<u></u>
	A		énnem en la companya de la companya	nd Other Depreciation	on (Do no	t include list	ad proper	t_{1} $(S$	ee instructions)
14				If Opportunity Zone proper				<u>19.7 (</u>	
				placed in service during the				14	
15								15	
16	Other depreciation (in	cluding ACRS)		· • · · · · · · · · · · · · · · · · · ·				16	
Pa				ude listed property.) (
-JAMIC				Section A					
17	MACRS deductions for	or assets place	d in service in tax	years beginning before 200)7			17	195,765
18				the tax year into one or more g					
		Section B-Ass	······································	vice During 2007 Tax Yea	Using the (General Deprec	iation Syste	H11	
	(a) Classification of pr	operty	(b) Month and year placed in service	 (c) Basis for depreciation (business/investment use onty-see instructions) 	(d) Recovery period	(e) Convention	(f) Meth	od (g) Depreciation deduction
19a	3-year property								
b	5-year property			1,023,085	5.0	HY	200DE	}	204,618
C	7-year property								
d	10-year property		/ . + .C. 500 / . + . + . + . + . + . + . + . + . + .				<u> </u>		
	In Juni Property								
<u>.</u>	15-year property				·····				
<u> </u>								······	
f	15-year property 20-year property 25-year property				25 утз.		S/L		
f	15-year property 20-year property 25-year property Residential rental				27.5 yrs.	MM	S/L		
f 9 h	15-year property 20-year property 25-year property Residential rental property				27.5 yrs. 27.5 yrs.	MM	\$/L \$/L		
f	15-year property 20-year property 25-year property Residential rental property Nonresidential real				27.5 yrs.	MM MM	<u>S/L</u> <u>S/L</u> <u>S/L</u>		
f 9 h	15-year property 20-year property 25-year property Residential rental property Nonresidential real property				27.5 yrs. 27.5 yrs. 39 yrs.	MM MM MM	S/L S/L S/L S/L		
f 9 h i	15-year property 20-year property 25-year property Residential rental property Nonresidential real property Se	ection C-Asset	<u>s Placed in Servi</u>	ce During 2007 Tax Year	27.5 yrs. 27.5 yrs. 39 yrs.	MM MM MM	S/L S/L S/L S/L ciation Sys	tem	
f 9 h i 20a	15-year property 20-year property 25-year property Residential rental property Nonresidential real property Se Class life	ection C-Asset	3 Placed in Servi	ce During 2007 Tax Year	27.5 yrs. 27.5 yrs. 39 yrs. Using the Al	MM MM MM	S/L S/L S/L S/L clation Sys	tem	
f 9 h i 20a b	15-year property 20-year property 25-year property Residential rental property Nonresidential real property Sc Class life 12-year	ection C-Asset	s Placed in Servi	ce During 2007 Tax Year	27.5 yrs. 27.5 yrs. 39 yrs. Using the Al	MM MM MM_ ternative Depre	S/L S/L S/L S/L clation Sys S/L S/L	tem	
f 9 h i 20a b c	15-year property 20-year property 25-year property Residential rental property Nonresidential real property Se Class life 12-year 40-year			ce During 2007 Tax Year	27.5 yrs. 27.5 yrs. 39 yrs. Using the Al	MM MM MM	S/L S/L S/L S/L clation Sys	tem	
f g h i 20a b c Pa	15-year property 20-year property 25-year property Residential rental property Nonresidential real property So Class life 12-year 40-year art IV Summar	y (see instr	uctions)		27.5 yrs. 27.5 yrs. 39 yrs. Using the Al 12 yrs. 40 yrs.	MM MM ternative Depre	S/L S/L S/L S/L clation Sys S/L S/L		
f 9 h i 20a b C Pa 21	15-year property 20-year property 25-year property Residential rental property Nonresidential real property Se Class life 12-year 40-year art IV Summar Listed property. Enter	y (see instruction)	uctions)		27.5 yrs. 27.5 yrs. 39 yrs. Using the Al 12 yrs. 40 yrs.	MM MM ternative Depre	S/L S/L S/L S/L clation Sys S/L S/L	tem 21	
f g h i 20a b c Pa	15-year property 20-year property 25-year property Residential rental property Nonresidential real property Sc Class life 12-year 40-year Summar Listed property. Enter Total. Add amounts f	y (see instru- r amount from I from line 12, lin	uctions) line 28 es 14 through 17,	lines 19 and 20 in column	27.5 yrs. 27.5 yrs. 39 yrs. Using the Al 12 yrs. 40 yrs.	MM MM ternative Depre	S/L S/L S/L S/L clation Sys S/L S/L	21	400.383
f 9 h i 20a b c Pa 21	15-year property 20-year property 25-year property Residential rental property Nonresidential real property So Class life 12-year 40-year At IV Summar Listed property. Enter Total. Add amounts f Enter here and on the	y (see instru- r amount from) from line 12, lin- e appropriate lin	uctions) ine 28 es 14 through 17, nes of your return.	lines 19 and 20 in column Partnerships and S corpor	27.5 yrs. 27.5 yrs. 39 yrs. Using the Al 12 yrs. 40 yrs.	MM MM ternative Depre	S/L S/L S/L S/L clation Sys S/L S/L		400,383
f 9 h 20a b c 21 22	15-year property 20-year property 25-year property Residential rental property Nonresidential real property Sc Class life 12-year 40-year Summar Listed property. Enter Total. Add amounts f	y (see instru- r amount from) from line 12, lin- e appropriate lin ove and placed	uctions) line 28 es 14 through 17, nes of your return. l in service during	lines 19 and 20 in column Partnerships and S corpor the current year,	27.5 yrs. 27.5 yrs. 39 yrs. Using the Al 12 yrs. 40 yrs.	MM MM ternative Depre	S/L S/L S/L S/L clation Sys S/L S/L	21	400,383

K	IDPRO	NGRASA OS	20851 _{RI} 90	pg,1 IN	iłęd 08 Docur	3/30/(99-0E	ntere	d 08/3 3 of 84	30/09	21:19	9:09	Des	c Mai	n	~ 7
	4562 (2007 I rt V	Listed Prope	rty (Include								nhone		tain co	minute	are on	Page 2
		property use	d for entertai	nment, re	ecreation	on, or	amuse	ment	}		•	-		mpan	710, ani	
		Note: For any ve 24a, 24b, columi	hicle for which y	ou are usin	g the sta	ndard n	nileage r	ate or de	ducting	lease e	opense,	complet	e only			
Sect	ion A-Der	preciation and Oth														
· · · · · · · · · · · · · · · · · · ·		we evidence to suppo					Yes	No	······································		<u> </u>	vidence	written?)	Yes	No
	(a)	(b)	(c)				(e)		(f)	1 103,	(g)		(h)		(i	
	of property	Date placed in	Business/	d) Cost or			is for depr		Recover	y M	ethod/		Depreciat	ion	Elec	sted
	vehicles first)	service	Use	ba	sis	(but	siness/inv use only		period	Co	nvention		deductic)r)	section of the sectio	en 179 Ist
25	Special	allowance for quali		unity Zone	property	placed i			the							
		and used more the				•		-			. 2	5				
26	Property	used more than 5	0% in <u>a</u> qualified	business u	ise:											
															ļ	
			%													
			%				······································		J]	- 172kaa
27	Property	used 50% or less	in a qualified bu	siness use:	·	•	_		1						5	
										~		ľ.				
			%	·····			······		<u> </u>	\$/L						
			0/						ļ	S/I	_					
28	Adri ama	ounts in column (h) lines 25 throw	h 97 Entar	hore on	d on line	e 71 nar				2	R			1	
29		ounts in column (i)					σ∡i, μοξ	367 I						29		<u></u>
					ction B-l		tion on i	lise of l	(ehicles	<u></u>			<u> </u>		1	
Com	plete this	section for vehicle	s used by a sole							or relate	d perso	n.				
If you	u provideo	I vehicles to your e	employees, first a	answer the	question	s in Sec	tion C to	see if y	rou meet	an exce	ption to	complet	ting this	section	for those	vehicles
30	Total bu	siness/investment	miles driven	····	()	a)	(b)	(»)	(d)	(e)	(ŋ
	during th	ie year (do not inc	lude commuting		Veh	icle 1	Veh	iicle 2	Vehi	cle 3	Veh	icle 4	Veh	iicle 5	Vehi	<u>cle 6</u>
	miles)	*****							<u></u>							
31	Total co	mmuting miles driv	ven during the ye	ar			<u></u>		L		ļ	· · · · · · · · · · · · · · · · · · ·	ļ		<u> </u>	
32		ner personal (nonc		driven					<u> </u>			·····			Ļ	
33		les driven during t	he year. Add		l		1									
		through 32		*******			<u> </u>		+		<u> </u>	T			<u> </u>	
34		vehicle available ng off-duty hours?	-		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35		vehicle used prim		****					<u></u>			1	<u> </u>			<u>+</u>
~~		an 5% owner or re													l	
36		er vehicle availabl	• •	e?	L		1	1	<u>†</u>						-	
.			Section C-Que		molove	s Who	Provide	Vehicle	s for Us	e by Th	eir Emp	lovees	J	nd	<u> </u>	d <u></u> ,
Ansı	ver these	questions to deter								-	-	•	Ire			
		5% owners or rela														
															Yes	No
37	Do you	maintain a written	policy statement	that prohib	its all pe	rsonal u	ise of ve	hicles, il	ncluding	commut	ing, by y	/our emp	bloyees	?		
38		maintain a written														
		instructions for ve					or 1% or	r more o	wners	• • • • • • •	* * * * * * * *				ļ	ļ
39		treat all use of veh											,			
40		provide more than				ain info	rmation '	from you	ir employ	ees ab	out					
41		of the vehicles, an					,									
41		meet the requirem											• • • • • • • •			12000000
P	art VI	your answer to 37 Amortizatio		13 185,	UD HOL CL	anpiete	<u>əcup</u> î		e covere	u venici	53. 	····			<u> (1997) (1997)</u>	<u>a</u>
1899653		CIIVICIZALIU				·				1	T	(e)	T		10	
		(a)		(t Date am	o) ortization	[Am	(c) ortizable		(d Co) de	Amortiza period		An	(f) Iortization	for
		Description of cost	\$	beg				mount		sec		percent		* *11	this year	
42	Amortiz	ation of costs that	begins during vo	our 2007 tax	year (se	e instru	ctions):	······································		-4.,						
<u></u>										1	Ī		1			
	·····		······································													
43	Amortiz	ation of costs that	began before yo	ur 2007 tax	year		• • • • • • • •				• • • • • • • • •		43			47
44		dd amounts in col										<u></u> .	44			47

ij

Case 0				ed 08/30/09 2	1:19:09 Desc	: Main
Form 4684	Do	ogina	Nalties and 7	Ĩħefts ⁴		OMB No. 1545-0177
			e separate instru			2007
Department of the Treasury			tach to your tax r			Attachment
Internal Revenue Service	► Use a s	eparate	Form 4684 for eac	ch casualty or theft.	\	Attachment Sequence No. 26
Name(s) shown on tax return KTDPRONGHORN	ENTERPRISES, INC.				Identifying num 83-0333	100
SECTION A-Personal 1	Use Property (Use this sec	tion to	report casualti	es and thefts of	property not used	l in a trade
or busines	s or for income-producing	purpos	es.)		F F	
1 Description of properties i	(show type, location, and date acqu	uired for (each property). Us	e a separate line for	each property lost or d	amaged
from the same casualty o	r theft.					
	Name					
Property D						······
			······································	Đrớ	perties	
			A	B	C	D
	ſ					
2 Cost or other basis of eac	ch property	2				
3 Insurance or other reimbu	Insement (whether or not					
you filed a claim) (see ins	structions)	3				
Note: If line 2 is more that	an line 3, skip line 4.					
4 Gain from casualty or the					Í	
	re and skip lines 5 through 9 uctions if line 3 includes in-					
surance or other reimburg	sement you did not claim, or	4				
you received payment for	your loss in a later tax year	- *				
5 Fair market value before	casualty or theft	5				
						ļ
6 Fair market value after ca	asualty or theft	6				
7 Subtract line 6 from line 5	5	7				
من معرف من ما ما ما م						
9 Subtract line 3 from line 8	2 or line 7	8				
	1	9				
OHGI "Q"		<u></u>		1		
10 Casualty or theft loss. Ad	ld the amounts on line 9 in column	s A throu	gh D		10)
·			• •••••••••	******************		
11 Enter the smaller of line	10 or \$100	*****				
12 Subtract line 11 from line	10					2
Caution: Has oaks and E	ann 4004 far Kupa 60 Marsuch 40					
-	orm 4684 for lines 13 through 18.				13	2
14 Add the amounts on line	12 of all Forms 4684	•••••		****************	14	
15 • If line 14 is more than	line 13, enter the difference here a	and on So	chedule D. Do not		, , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·
	is section (see instructions).				1	5
 If line 14 is less than I 	ine 13, enter -0- here and go to line	∋ 16.				
 If line 14 is equal to line 	ne 13, enter -0- here. Do not comp	lete the r	est of this section.			
16 If line 14 is less than line	13, enter the difference	• • • • • • • •	* • ± / • * * • • • • • • • • • •		,,	<u> </u>
47 Enter 1894 of unus a fund	and groom income from Erum 4040	lina 20 -		an 28 Enteter and		
* *	ed gross income from Form 1040,		•		1	,
ບບວນອຸ ອອອະແອນເປັນເຊຍາໄຮ	• - • • z ; • * • • • • • • • • • • • • • • • • •	, ,	* 2 * * * * * * * * * * * * * * * * *	7 W H + 1 I I + 1 K 7 I K > 1 + 1 I K	···· /	r
18 Subtract line 17 from line	a 16. If zero or less, enter -0 Also	enter the	result on Schedul	le A (Form 1040). line	e 20,	
	40NR), line 8. Estates and trusts, e			•		
tax return	· · · · · · · · · · · · · · · · · · ·	<u></u>	<u> </u>	·····	<u> </u>	8
For Paperwork Reduction A	Act Notice, see page 4 of the inst	ructions.				Form 4684 (2007

Ĥ

DAA

Form			3/30/09 E		ed 08/30/09 21 5 of 84	:19:09 De	esc N	/lain Page 2
Name	(s) shown on tex return. Do not enter name and identifying number	if shown	on other side.			Identifying	numbe	ſ
	LDPRONGHORN ENTERPRISES, INC					83-03	3318	38
	TION B-Business and Income-Producing P rt I Casualty or Theft Gain or Loss (Us		······	lford	ach casualty or t	hoft)	·	
19	Description of properties (show type, location, and date a						st or da	
	aged from the same casualty or theft.					ewwer for observing rat		
	Property A		NAA					
	Property B							
	Property C							
	Property D	T			Prope	tian		
		ļ.	A	T	B	<u>C</u>		D
20	Cost or adjusted basis of each property	20			· · · · · · · · · · · · · · · · · · ·			······································
21	Insurance or other reimbursement (whether or not						Ī	**************************************
	you filed a claim). See the instructions for line 3	21						······································
	Note: If line 20 is more than line 21, skip line 22.							
22	Gain from casualty or theft. If line 21 is more than line 20, enter the difference here and on line 29 or line 34,							
	column (c), except as provided in the instructions for			J				
	line 33. Also, skip lines 23 through 27 for that column.							
	See the instructions for line 4 if line 21 includes insurance or other reimbursement you did not claim, or			Í			1	
	you received payment for your loss in a later tax year	22						
23	Fair market value before casualty or theft	23						······
24 25	Fair market value after casualty or theft	24 25						<u></u>
26	Subtract line 24 from line 23 Enter the smaller of line 20 or line 25	26						
	Note: If the property was totally destroyed by		,,,,,,,,,_					
	casualty or lost from theft, enter on line 26 the amount from line 20.			ſ				
27	Subtract line 21 from line 26. If zero or less, enter -0-	27						
28 28	Casualty or theft loss. Add the amounts on line 27. Enter the total rt II Summary of Gains and Losses (fro				(b) Losses from c		28	
						fii) Income-		(c) Gains from casualties or thefts
	(a) Identify casualty or theft				(i) Trade, business, rental or royalty property	producing an employee prop	d erty	includible in income
	Casualty or T	<u>heft o</u>	f Property I	<u>leld C</u>	ne Year or Less		u	
29				ť		/ 	<u> </u>	
30	Totals. Add the amounts on line 29			30				
31	Combine line 30, columns (b)(i) and (c). Enter the net ga				4797, line 14. If Form	4797		
	is not otherwise required, see instructions						31	
32	Enter the amount from line 30, column (b)(ii) here. Indivi on Schedule A (Form 1040), line 28, or Schedule A (For	duals, e	enter the amou	nt from i	income-producing pro	perty		
	used as an employee on Schedule A (Form 1040), line 2	23. or S	chedule A (For	m 1040	NR), line 11, Estates		32	
·····	trusts, partnerships, and S corporations, see instructions Casualty or Th				ore Than One Ye		_34	······································
33	Casualty or theft gains from Form 4797, line 32						33	155
34				k		(1	
				K		(*****
35	Total losses. Add amounts on line 34, columns (b)(i) and				· · · · · · · · · · · · · · · · · · ·	(155
36 37	Total gains. Add lines 33 and 34, column (c) Add amounts on line 35, columns (b)(i) and (b)(ii)					····	36 37	
38	If the loss on line 37 is more than the gain on line 36:							
8	Combine line 35, column (b)(i) and line 36, and enter the net gain corporations, see the note below. All others, enter this amount on	or (loss) Form 4) here. Partnershi 797. line 14. lf Fo	ps (exce m 4797	ot electing large partnersh is not otherwise required	ips) and S see instructions	38a	
ь	Enter the amount from line 35, column (b)(ii) here. Individuals, en	ter the a	mount from incon	ie produ	cing property on Schedule	A (Form 1040),		
	Enter the amount from line 35, column (b)(ii) here. Individuals, en line 28, or Schedule A (Form 1040NR), line 16, and enter the am or Schedule A (Form 1040NR), line 11. Estates and trusts, enter	on the "C	n property used a Other deductions*	s an emp line of yo	ioyee on schedule A (Fo	m 1040), iine 23 s (except electing		
39	large partnerships) and S corporations, see the note below. Elect if the loss on line 37 is less than or equal to the gain on line 36,	ing large	e partnerships, en	er on Fo	rm 1965-B, Part II, line 11	***********	<u>38b</u>	unių
~~	(except electing large partnerships), see the note below. All other	s, enter i	this amount on Fo	am 4797	, line 3		39	155
	Note: Partnerships, enter the amount from line 38a, 36 S corporations, enter the amount from line 38a c							

	-	Case 09-2	0851 Doc 1		9 Entered 08/30		Desc	Main
Form	479	37		Sales of Bu	Page 76 of 84 Isiness Property	r		OMB No. 1545-0184
		T	(Also	Involuntary Conve Under Section	ersions and Recapti s 179 and 280F(b)(2	ure Amounts		2007
	tment of the al Revenue S		•		Im. 🕨 See separate inst			Attachment Sequence No. 27
Name	(s) shown or	netum				Ident	ifying num	ber
Ŧ.#*		1/11/2221 - 1223		T \ 1.0			A 3 3 3	100
		······································	ERPRISES,				-0333	180
1					007 on Form(s) 1099-B or			
P/a	ntl	Sales or Exch	anges of Prop	erty Used in a Trad	le or Business and I	nvoluntary Con	version	s From Other
0000000000	0.000.00000				re Than 1 Year (see			
	2 ¹⁴ - * a*	1			(e) Depreciation	(f) Cost or oth	er	(g) Gain or (loss)
	Description property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	allowed or allowable since	improvements a	and	Subtract (f) from the
	P7		(accuisition	expense of sa		sum of (d) and (e)
2						·····		
						and a second		
3							3	155
4		ny, from Form 4684 231 gain from insta			· <i>· · · · · · · · · · · · · · · · · · </i>	• • • • • • • • • • • • • • • • • • •		<u> </u>
5	Section 1	231 gain nor (loss) f	rom like kind eyche	noes from Form 8824	· · · · · · · · · · · · · · · · · · ·		5	······································
6	Gain, if a	ny, from line 32, fro	m other than casua	lity or theft			6	
7	Combine	lines 2 through 6. I	Enter the gain or (lo	ss) here and on the app	ropriate line as follows:		7	155
	Partners	hips (except electi	ing large partnerst	ips) and S corporation	s. Report the gain or (loss) following the		
					ule K, line 9. Skip lines 8, 1	· · ·		
	from line	ils, partners, S coi 7 on line 11 below	poration sharehole and skip lines 8 and	ders, and all others. If it 19. If line 7 is a cain and	ine 7 is zero or a loss, entr I you did not have any pric	er the amount or year section		
	1231 loss	es, or they were re	captured in an earli	er year, enter the gain fr	om line 7 as a long-term o	apital gain		
8				p lines 8, 9, 11, and 12 t or years (see instruction			8	
9			*	• •	er the gain from line 7 on I	ne 12 below.		· · · · · · · · · · · · · · · · · · ·
	If line 9 is	more than zero, e	nter the amount fro	m line 8 on line 12 below	and enter the gain from l	ine 9 as a	9	
P				(see instr <u>uc</u> tions)	ructions)	<u> </u>	┛┈┻┈	
10					property held 1 year or les	s):		
•							·····	۵٬۰۰۰ میں
•····•		l	<u> </u>		Land			······································
11		ny, from line 7				*********	<u>11 K</u>)
12	Gain, if a	ny, from line 7 or a			•••••••••			E OEO
13		ny, from line 31		00-	********		1 4 4	5,852
14 15			1 4684, lines 31 and					<u> </u>
16					· · · · · · · · · · · · · · · · · · ·			
17		lines 10 through 1	e				17	5,852
18		-			propriate line of your retu			
		•	•	plete lines a and b below		· <i>F</i>		
а)(ii), enter that part of the	loss here. Enter		
	the part o	of the loss from inc	ome-producing prop	erty on Schedule A (For	m 1040), line 28, and the	part of the		
	loss from	property used as a	an employee on Sc	hedule A (Form 1040), li	ne 23. Identify as from "Fo	orm 4797, line		
		a instructions					<u>18a</u>	
þ			,		ine 18a. Enter here and or			
,	<u>fine 14 .</u>				**************************************	<u></u>	<u>18b</u>	Form 4797 (2007)
ror	raperworl	Creauction Act N	otice, see separate	INSTRUCTIONS.				rorm 4131 (2007)

Case 09-20851 PDgc 11 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main Form 4797 (2007) KIDPRONGHORN ENTERPRD 90 smpentNC. Page 78 94 84 33188

Page 2

Pa	rt III Gain From Disposition of Property Under (see instructions)	r Secti	ons 1245, 1250,	1252,	, 1254, a	nd 125	5	
19	(a) Description of section 1245, 1250, 1252, 1254, or 1255 prope	erty:				1	te acquired day, yr.)	(c) Date sold (mo., day, yr.)
	1997 FORD F150		,			3/	22/05	2/06/07
в					······································			
С		······						
<u>D</u>								
-	These columns relate to the properties on lines 19A - 19D.	►	Property A	Prop	perty B	Pro	perty C	Property D
20	Gross sales price (Note: See line 1 before completing.)	20	9,655					
21	Cost or other basis plus expense of sale	21	9,500	۲,		-		
22	Depreciation (or depletion) allowed or allowable	22	5,852					· · · · · · · · · · · · · · · · · · ·
23	Adjusted basis. Subtract line 22 from line 21	23	3,648					
24	Total gain. Subtract line 23 from line 20	24	6,007			ļ	1	
25	If section 1245 property:					1		
а	Depreciation allowed or allowable from line 22	25a	5,852					
_ь	Enter the smaller of line 24 or 25a	25b	5,852					
26	If section 1250 property: If straight line depreciation was used, enter							
	-0- on line 26g, except for a corporation subject to section 291.					l		
a	Additional depreciation after 1975 (see instructions)	26a					-	
b	Applicable percentage multiplied by the smaller of line 24 or							
	line 26a (see instructions)	26b						
С	Subtract line 26a from line 24. If residential rental property or							
	line 24 is not more than line 26a, skip lines 26d and 26e	26c						
d	Additional depreciation after 1969 and before 1976	26d						
e	Enter the smaller of line 26c or 26d	26e				_ <u></u>		
f	Section 291 amount (corporations only)	26f						
_ <u>g</u> _	Add lines 26b, 26e, and 26f	26g						
27	If section 1252 property: Skip this section if you did not		Í					
	dispose of farmland or if this form is being completed for a		l			ļ		
	partnership (other than an electing large partnership).							
а	Soil, water, and land clearing expenses	27a		·····		<u> </u>		<u> </u>
ь	Line 27a multiplied by applicable percentage (see instructions)	27b						
<u> </u>	Enter the smaller of line 24 or 27b	27c				_		
28	If section 1254 property:							
а	Intangible drilling and development costs, expenditures for							
	development of mines and other natural deposits, and							
	mining exploration costs (see instructions)	28a						
<u>b</u>	Enter the smaller of line_24 or 28a	28b						
29	If section 1255 property:					ĺ		
a	Applicable percentage of payments excluded from income					ļ		
	under section 126 (see instructions)	29a		······································				
<u>b</u>	Enter the smaller of line 24 or 29a (see instructions)	29b				_ <u></u>		
Sur	nmary of Part III Gains. Complete property column	ns A th	rough D through	i line 2	29b befo	re goin	<u>p to line 3</u>	<u>80</u>
30	Total gains for all properties. Add property columns A through D), line 24					30	6,007
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, ar	nd 29h						
-	Enter here and on line 13						31	5,852
32	Subtract line 31 from line 30. Enter the portion from casualty or	theft on	Form 4684, line 33,	Enter th	ne portion f	írom		
							32	155
P	other than casualty or theft on Form 4797, line 6. Art IV Recapture Amounts Under Sections 179	and 2	80F(b)(2) When	Busi	ness Us	e Drops	to 50%	or Less
	(see instructions)					- 1		
					(a)	Section	<u> </u>	(b) Section
						179		280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in price	or years		33				
34				34			,	
35	Recapture amount. Subtract line 34 from line 33. See the instru			35				
DAA							}.	Form 4797 (2007

12:51 PM 07/31/09

Cash Basis

È

Balance Sheet--Cash Basis--COMPILED

As of April 30, 2009

	Apr 30, 09
ASSETS	
Current Assets	
Checking/Savings	0 000 F4
Cowboy State Savings FIB Checking	2,008.51 -1,321.57
Wells FargoChecking	-65,098.51
Total Checking/Savings	-64,411.57
Other Current Assets	65 350 50
Due from (to) Shareholder Employee Advance on Footage	80,258.36 20,097.81
Employee Advance on Pay	17,827.37
Total Other Current Assets	118,183.54
Total Current Assets	53,771.97
Fixed Assets	
'03 Dodge Ram 2500QuadCab Charc	23,500.00
'04 Dodge Ram 3500 Gold	28,800.00
'06 Dodge Ram 3500Quad Charcoal '06 Lamar Dump Box Trailer	33,500.00 12,300.00
107 Interstate 7x12EnclosedTrir	5.220.00
'07 Interstate Black Cargo Trir	5,448.00
'07 Interstate Silver Cargo Tri	8,455.00
14' SN Trailer	2,666.20
1970 Autoeor Drill Rig	31,567.82
1970 General Belly Dump Trir	7,500.00
1974 Kenwork Vac Truck 1977 Ford F150 Pickup	8,761.50 3,500.00
1978 KW w/1500 GD Rig	160,110.00
1979 Peterbilt 379 Truck	15,000.00
1981 Inti Transtar 4300 Trk	3,700.00
1988 Peterbilt Flatbed	12,000.00
1989 Kenworth Truck 1990 Kenworth F800	10,000.00 5,794.70
1991 Western Star	12,140.51
1994 Champion Mobile Home	44,500.00
2000 Blue Pickup	15,673.84
2000 New Holland Backhoe	91,681.57
2001 Ford F250 2002 F350 Ford Tan	16,225.17
2002 Ford F350 Beige Pickup	24,164.00 33,339.00
2003 Equipment	1,000.00
2003 F-350 PULt. Brown	33,000.00
2003 F350 XLT Beige	32,054.00
2003 Ford Excursion	35,702.00
2003 Ford Ranger Brown 2004 F350 XLT Beige	11,300.00 37,038.00
2005 Computer	1,700.49
2006 LaMor Car Trailer	4,120.00
2006 Starcraft Pickup Camper	10,918.00
2007 Voyager 22' Black Trir	3,495.00
30' Trailer 416 Cat Backhoe	1,100.00 45,000.00
53' Enclosed Van	12,500.00
Accux razor mower	5,299.99
Allmand Maxi Heaters (2)	39,842.70
Backhoe John Deere 310 SJ	104,627.30
Blue Crew Cab PU Babaat Tmak Leader	11,263.62
Bobcat Track Loader Cargo Trailer	59,443.46 1,065.00
Continenal Emsco Mud Pump	50,750.00
Cummins ReCon Engine	15,000.00
D375 Emsco Mud Pump	44,625.00
Detroit Diesel 6-71 Power Units	11,917.50
Employee housing	37,930.26

..

12:51 PM 07/31/09

Cash Basis

Balance Sheet--Cash Basis--COMPILED

As of April 30, 2009

	Apr 30, 09
Equipment	128,674,79
EquipmentA/D	-1,202,428.00
Flatbed Car Trailer	3,940.00
JD 350C Dozer	7,921.38
Laptop Computer	943.95
Light Plant	4,500.00
Mud Pump #5	10,000.00
Olympia Steel Shop Building	24,000.00
PJ Backhoe Trailer	10,900.00
Plate Vibrator	2,109,40
Ponderosa Drive Mobile	89.546.01
Rig #6	200,000.00
Rig #7	600,000.00
Silver F450 PU	13,713.31
Speedstar Drill	325,000.00
Storage Van	3,450.00
Truck	12,000.00
Utility Trailer	1,907.00
Water Truck	5,500.00
Water Truck #10	15,000.00
Winch Truck	1.600.00
Yamaha 4 Wheeler	6,500.00
Total Fixed Assets	1,491,017.47
Other Assets	
Earnest Deposit	500.00
Investment in MSDW	28,244.69
Loan-Trottier	2,000.00
Loan Fees	666.00
Loan FeesAmortization	-606.00
N/R—Anthony Hernandez	2,750.00
N/RColt Munson	1,350.00
N/R-Single Water	5,088.77
N/RTravis Bickel	1,500.00
N/R-Dawson Powers	13,930.00
Short Term Loan-SB	15,250.00
Suspense	536.00
Trendwest	55,248,52
Woodland Park Property	10,645.53
Total Other Assets	137,103.51
TOTAL ASSETS	1,681,892.95
	1,001,034.50
Liabilities	
Current Liabilities	
Other Current Liabilities	
	707 24
Fed W/H Payable	-202.00
FUTA Payable	-0.02
Payroll Liabilities	54.85
SS/Medicare Payable	-214.10
Total Other Current Liabilities	-361.27
Total Current Liabilities	-361.27

Case 09-20851

12:51 PM 07/31/09

Cash Basis

Balance Sheet--Cash Basis--COMPILED

As of April 30, 2009

	Apr 30, 09
Long Term Liabilities	
108 LOC-Wells Fargo	209,441.49
Lease Payable-Rig #6	40,892.58
LOC-Wells Fargo-6676/7107	75,368.85
N/P-1988 Peterbilt Flatbed	6,123.70
N/P416 Cat Backhoe	20,295.02
N/PCiticapitalBobcatTrk Ldr	35,207.54
N/P-Cochrane (2003)	10,143.63
N/P-Cochrane (2004)	12,145.06
N/P-FIB-'06 DodgeRamQuadDuali	7,283.74
N/PFIB'06 Lamar DumpBox Tr	5,068.73
N/PFIB'07Interstate7x12Trlr	2,404.80
N/P-FIB-2003 Excursion	13,304.89
N/P-FIBDodge Pickups	12,923.38
N/P-FIB-Loan 0200008314	14,642.76
N/P—JD Credit 310 Backhoe	81,495.46
N/PWells FargoRig 7	317,657.01
N/P-CSB-Ponderosa Drive	40,383.74
Note Payable—Peggy Taylor	94,035.08
Note Payable-Pronghorn Drill	135,000.00
Note Payable-Shareholder	50,000.00
Note Payable-Robert Taylor	33,881.16
Total Long Term Liabilities	1,217,698.62
Total Liabilities	1,217,337.35
Equity	
Capital Stock	7,339.39
Retained Earnings	379,034.18
Shareholder Distribution	-22,000.00
Net Income	100,182.03
Total Equity	464,555.60
TOTAL LIABILITIES & EQUITY	1,681,892.95

~~~

Doc 1 Filed 08/30/09 Entered 08/30/09 21:19:09 Desc Main KID PRONGHOR ENTERPRISES, INC.

12:53 PM 07/31/09

**Cash Basis** 

Profit & Loss--Cash Basis--COMPILED

January through April 2009

|                                   | Jan - Apr 09 |
|-----------------------------------|--------------|
| Ordinary Income/Expense           |              |
| Income<br>Drilling Income         | 442,203.80   |
| Lease Income                      | 18,273.92    |
| Total Income                      | 460,477.72   |
| Expense                           |              |
| Accounting and Legal              | 3,846.20     |
| Advertising                       | 750.00       |
| Bad Debt Expense                  | -2,416.44    |
| Bank Charges                      | 1,039.71     |
| Employee Benefit                  | 1,346.91     |
| Employee Health Insurance         | 0.00         |
| Finance Charges                   | 1,266.85     |
| Gas and Oil                       | 30,758.69    |
| Housing Costs - Sheridan          | 2,090.83     |
| Insurance                         | 5,978.54     |
| Interest Expense<br>Lease Expense | 14,139.23    |
| Chopping Motor Lease              | 17.796.84    |
| Lease Expense - Other             | 3,500.00     |
| Total Lease Expense               | 21,296.84    |
| Meals                             |              |
| Business Meals                    | 59.76        |
| Meals - Other                     | 219.54       |
| Total Meals                       | 279.30       |
| Medical Expense                   | 267.52       |
| Miscellaneous                     | 500.00       |
| Office Expense                    | 775.98       |
| Office Furniture                  | 1,000.00     |
| Payroll Taxes                     | 33,061.34    |
| Per Diem                          | 22,105.00    |
| Rent Expense                      | 27,633.47    |
| <b>Repairs and Maintenance</b>    | 39,081.37    |
| Salaries & Wages                  |              |
| Officer Compensation              | 17,510.40    |
| Wage Expense                      | 97,352.29    |
| Total Salaries & Wages            | 114,862.69   |
| Subcontractor                     | 3,945.88     |
| Supplies                          | 31,616.75    |
| Taxes and Licenses                | 15,490.48    |
| Telephone                         | 6,737.42     |
| Tools                             | 335,29       |
| Travel and Lodging                | 212.62       |
| Utilities                         | 2,293.22     |
| Total Expense                     | 380,295.69   |
| Net Ordinary Income               | 80,182.03    |
| Other Income/Expense              |              |
| Other Income                      |              |
| Sale of Assets                    | 20,000.00    |
| Total Other Income                | 20,000.00    |
| Net Other Income                  | 20,000.00    |
| Net Income                        | 100,182.03   |
|                                   |              |

KID PRONGHORN ENTERPRISES, INC.

Statement of Cash Flows--COMPILED

January through April 2009

|                                           | Jan - Apr 09 |
|-------------------------------------------|--------------|
| OPERATING ACTIVITIES                      |              |
| Net Income                                | 100,182.03   |
| Adjustments to reconcile Net Income       | ,            |
| to net cash provided by operations:       |              |
| Due from (to) Shareholder                 | 1,157.12     |
| Employee Advance on Pay                   | -415.00      |
| Fed W/H Payable                           | -235.00      |
| FUTA Payable                              | -275,10      |
| N/PKC Trk Parts'79Peterbilt               | -10,000,00   |
| Payroll Liabilities                       | -7.44        |
| Payroll Liabilities:NE Withholding        | -190.19      |
| Sales Tax Payable                         | -1,17        |
| SS/Medicare Payable                       | -316.14      |
| Net cash provided by Operating Activities | 89,899.11    |
| INVESTING ACTIVITIES                      |              |
| N/RSingle Water                           | 177,611.23   |
| Trendwest                                 | -5,027.52    |
|                                           |              |
| Net cash provided by Investing Activities | 172,583.71   |
| FINANCING ACTIVITIES                      |              |
| '08 LOC-Wells Fargo                       | -4,479.61    |
| Lease Payable-Rig #6                      | -11,001.63   |
| LOC-Wells Fargo-5576/7107                 | 114.40       |
| N/P-Citicapital-BobcatTrk Ldr             | -3,580.96    |
| N/P-Cochrane (2003)                       | -1,811.92    |
| N/PCochrane (2004)                        | -2,177.64    |
| N/P-FIB'06 DodgeRamQuadDuall              | -2,770.14    |
| N/PFIB'06 Lamar DumpBox Tr                | -1,261.80    |
| N/PFIB'07Interstate7x12Trlr               | -661.52      |
| N/PFIB2003 Excursion                      | -2,111.59    |
| N/PFIBDodge Pickups                       | -4,914,74    |
| N/PFIB-Loan 0200008314                    | -4,314.47    |
| N/P-JD Credit 310 Backhoe                 | -3,501.36    |
| N/PRE & PA Taylor                         | -120,826.70  |
| N/PWells Fargo-Rig 7                      | -22,571.99   |
| N/P-CSB-Ponderosa Drive                   | -674.16      |
| Note Payable-Peggy Taylor                 | 13,535.08    |
| Retained Earnings                         | -50,500.00   |
| Shareholder Distribution                  | 28,500.00    |
| Net cash provided by Financing Activities | -195,010.75  |
| Net cash increase for period              | 67,472.07    |
| Cash at beginning of period               | -131,883.64  |
| Cash at end of period                     | -64,411.57   |

12:55 PM 07/31/09

| Form <b>70</b><br>(Rev. December 20<br>Department of the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>)4</b>                                                                                                                                                                       | Application for<br>Business Inc                                                                                 | ome Tax, Ir<br>File a separate a | Entered 08/30/09 21:19<br>Extegsion of 84 me To Fil<br>Information, and Other Resplication for each return. | e Certain 🛛 🛔           | Лain<br>Омб №. 1545-0233     |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------|--|--|
| Internal Revenue S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                 |                                                                                                                 | See sep                          | arate instructions.                                                                                         | <u>,</u>                |                              |  |  |
| Type or<br>Print                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Name<br>KIDE                                                                                                                                                                    | RONGHORN ENTERPF                                                                                                | RISES, IN                        | c.                                                                                                          | Identifying numbe       |                              |  |  |
| File by the due date for the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Numbør,                                                                                                                                                                         | street, and room or suite no. (If P.O. b                                                                        | ox, see instructions.)           |                                                                                                             |                         |                              |  |  |
| return for which                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 28 F                                                                                                                                                                            | RAIRIE SPRING LA                                                                                                | NE                               |                                                                                                             |                         |                              |  |  |
| an extension is requested. See                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                 | n, state, and ZIP code (If a foreign add                                                                        |                                  | nce or state, and country (follow the country'                                                              | s practice for entering |                              |  |  |
| instructions.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | · ·                                                                                                                                                                             | ••                                                                                                              | 100 00001                        |                                                                                                             |                         |                              |  |  |
| Note Rea in                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                 | IDAN                                                                                                            | WY 82801                         | -                                                                                                           |                         |                              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                 | s before completing this                                                                                        |                                  | - Form 1005 1041 of 8804                                                                                    |                         | <b></b>                      |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                 |                                                                                                                 |                                  | Form 1065, 1041, or 8804                                                                                    |                         |                              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | form code fo                                                                                                                                                                    | r the return that this application i                                                                            |                                  | <u>Г </u>                                                                                                   |                         | <u> </u>                     |  |  |
| Application                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                 |                                                                                                                 | Form                             | Application                                                                                                 |                         | Form                         |  |  |
| ls For:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                 |                                                                                                                 | Code                             | ls For:                                                                                                     |                         | Code                         |  |  |
| Form 1065                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                 |                                                                                                                 | 09                               | Form 1041 (estate)                                                                                          |                         | 04                           |  |  |
| Form 8804                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                 |                                                                                                                 | 31                               | Form 1041 (trust)                                                                                           |                         | 05                           |  |  |
| Part II                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Automati                                                                                                                                                                        | c 6-Month Extension Cor                                                                                         | nplete if Filing                 | Other Forms                                                                                                 |                         |                              |  |  |
| b Enter the t                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | form code fo                                                                                                                                                                    | or the return that this application is                                                                          | s for (see below)                |                                                                                                             |                         | 25                           |  |  |
| Application                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                 |                                                                                                                 | Form                             | Application                                                                                                 |                         | Form                         |  |  |
| Is For:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                 |                                                                                                                 | Code                             | is For:                                                                                                     |                         | Code                         |  |  |
| Form 706-GS(D                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | )                                                                                                                                                                               |                                                                                                                 | 01                               | Form 1120-PC                                                                                                |                         | 21                           |  |  |
| Form 706-GS/T                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                 | Patricipa de la casa de | 02                               | Form 1120-POL                                                                                               |                         | 22                           |  |  |
| Form 1041-N                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                 |                                                                                                                 | 06                               | Form 1120-REIT                                                                                              |                         | 23                           |  |  |
| Form 1041-QFT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                 |                                                                                                                 | 07                               | Form 1120-RIC                                                                                               |                         | 24                           |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                 |                                                                                                                 |                                  |                                                                                                             |                         |                              |  |  |
| Form 1042                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                 |                                                                                                                 | 08                               | Form 1120-S                                                                                                 |                         | 25                           |  |  |
| Form 1065-B                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                 |                                                                                                                 | 10                               | Form 1120-SF                                                                                                |                         | 26                           |  |  |
| Form 1066                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                 |                                                                                                                 | 11                               | Form 3520-A                                                                                                 |                         | 27                           |  |  |
| Form 1120                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                 |                                                                                                                 | 12                               | Form 8612                                                                                                   |                         | 28                           |  |  |
| Form 1120-C                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                 |                                                                                                                 | 34                               | Form 8613                                                                                                   |                         | 29                           |  |  |
| Form 1120-F                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                 |                                                                                                                 | 15                               | Form 8725                                                                                                   |                         |                              |  |  |
| Form 1120-FSC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                 |                                                                                                                 | 16                               | Form 8831                                                                                                   |                         | 32                           |  |  |
| Form 1120-H                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                 |                                                                                                                 | 17                               | Form 8876                                                                                                   |                         | 33                           |  |  |
| Form 1120-L                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                 |                                                                                                                 | 18                               | Form 8924                                                                                                   |                         | 35                           |  |  |
| Form 1120-ND                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                 |                                                                                                                 | 19                               | Form 8928                                                                                                   |                         | 36                           |  |  |
| Form 1120-ND (                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | section 495                                                                                                                                                                     | 1 taxes)                                                                                                        | 20                               |                                                                                                             |                         |                              |  |  |
| LEASA ALL AND A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | nization is a                                                                                                                                                                   | foreign corporation that does not                                                                               | have an office or                | place of business in the United State:                                                                      |                         |                              |  |  |
| 3 If the orga                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | nization is a                                                                                                                                                                   | corporation and is the common j                                                                                 | parent of a group                | that intends to file a consolidated retur                                                                   | 'n,                     |                              |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | , attach a so                                                                                                                                                                   | chedule, listing the name, address                                                                              | s, and Employer l                | dentification Number (EIN) for each m                                                                       | ember                   | 🚩 🖵                          |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | y this applic                                                                                                                                                                   |                                                                                                                 |                                  |                                                                                                             |                         |                              |  |  |
| and the second state of th |                                                                                                                                                                                 | Must Complete This Par                                                                                          | ****                             |                                                                                                             |                         | ····                         |  |  |
| 4 If the orga<br>5a The applic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | nization is a<br>ation is for (                                                                                                                                                 | corporation or partnership that q calendar year 20 $08$ , or tax year                                           | ualifies under Reg<br>beginning  | ulations section 1/6081-5, check/hefe<br>, and ending                                                       | ····                    | ▶ [_]                        |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Short tax year. If this tax year is less than 12 months, check the reason:     Initial return    Final return    Change in accounting period    Consolidated return to be filed |                                                                                                                 |                                  |                                                                                                             |                         |                              |  |  |
| 6 Tentative                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | total tax 👝                                                                                                                                                                     |                                                                                                                 |                                  |                                                                                                             |                         | 0                            |  |  |
| 7 Total payr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ments and c                                                                                                                                                                     | redits (see instructions)                                                                                       |                                  |                                                                                                             | 7                       | 0                            |  |  |
| Electronic                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | : Federal Ta                                                                                                                                                                    | t line 7 from line 6. Generally, yo<br>ix Payment System (EFTPS), a I                                           | ederal Tax Depo                  | sit (FTD) Coupon, or                                                                                        |                         | 0                            |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                 |                                                                                                                 |                                  |                                                                                                             |                         | - 7004 (0-11)                |  |  |
| For Privacy Act<br>DAA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | and Papers                                                                                                                                                                      | vork Reduction Act Notice, see                                                                                  | separate Instruc                 | 00NS.                                                                                                       | Fon                     | n <b>7004</b> (Rev. 12-2008) |  |  |

Case 09-20851 Doc 1

| <b>Jnited</b> | States | Bankruptcy | Court |
|---------------|--------|------------|-------|
|               | 1000 C |            |       |

District of Wyoming

In re Kid Pronghorn Enterprises, Inc

| Chapter | 11 |  |
|---------|----|--|
|         |    |  |

Debtor(s)

## DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follow s:

| For legal services, I have agreed to accept           |           | 7,500.00 |
|-------------------------------------------------------|-----------|----------|
| Prior to the filing of this statement I have received | ,         | 7,500,00 |
| Balance Due                                           | <b>\$</b> | 0.00     |

2. The source of compensation paid to me was:

Debtor Other (specify)

3. The source of compensation to be paid to me is:

Debtor Debtor (specify)

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
   c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

Debtor has signed a written fee agreement. \$1,120 set off prior to filing.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

## CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in the bankruptcy proceeding.

8/30/2009

Date

Signature of Attomey

Name of law firm

B203 12/94