



Form 3A - Financial Assurance

Summary Information Overview

Form Name:	Form 3A - Financial Assurance
Document Number:	403707578
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Operator Information

Operator Number: **10759**
Operator Name: **ORGANIC ENERGY COMPANY LLC**
Operator Address: **1318 SMEDE HWY (HWY 92) ATTN: BENJAMIN BIENVENU**
Operator City: **BROUSSARD**
Operator State: **LA**
Operator Zip: **70518**
First Name: **BENJAMIN**
Last Name: **BIENVENU**
Contact Phone: **(281) 300-5049**
Contact Email: **ben@organicenergyco.com**
Subsidiary Operators: **None**

Summary

Financial Assurance Option: **2**
Financial Assurance Plan Amount \$: **\$54,000.00**
Form 3A - Balance \$: **\$0.00**

Rule 702 - Plugging, Abandonment, and Reclamation

Total Financial Assurance Required: **\$54,000.00**
Form 3A - Rule 702 Balance \$: **\$0.00**

Rule 703 - Other Oil and Gas Facilities & Operations

Total Financial Assurance Required: **\$0.00**
Form 3A - Rule 703 Balance \$: **\$0.00**

703 (E&P Waste Facilities) - Total Financial Assurance Required: **\$0.00**

Form 3A - Rule 703 Waste Facilities Balance \$: **\$0.00**

703 (Remediation Projects) - Total Financial Assurance Required: **\$0.00**

Form 3A - Rule 703 Remediation Projects Balance \$: **\$0.00**

703 (Seismic Operations) - Total Financial Assurance Required: **\$0.00**

Form 3A - Rule 703 Seismic Operations Balance \$: **\$0.00**

703 (Gas Facilities) - Financial Assurance Selection: **Blanket**

703 (Gas Facilities) - Total Financial Assurance Required: **\$0.00**

Form 3A - Rule 703 Gas Facilities Balance \$: **\$0.00**

703 (Produced Water Transfer Systems) - Total Financial Assurance Required: **\$0.00**

Form 3A - Rule 703 Produced Water Transfer Systems Balance \$: **\$0.00**

703 (Commercial Disposal Facilities) - Total Financial Assurance Required: **\$0.00**

Form 3A - Rule 703 Gas Facilities Balance \$: **\$0.00**

Rule 704 - Surface Owner Protection Bonds

Financial Assurance Selection: **Blanket**

Total Financial Assurance Required: **\$0.00**

Form 3A - Rule 704 Balance \$: **\$0.00**

Exempt from Rule 704: ☐

Instrument Allocation Summary

Instrument Summary: **None**

Signature and Certification

I hereby certify all statements made on this form are, to the best of my knowledge at the time of submittal, true, correct, and complete.

Operator Comments:

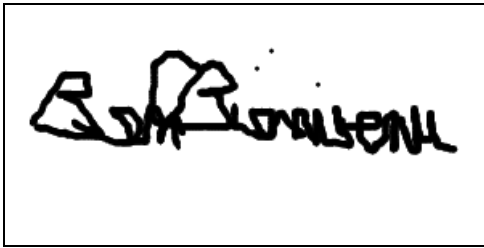
Name: **BENJAMIN BIENVENU**

Title: **OWNER/MANAGER**

Email: **ben@organicenergyco.com**

Phone: **(281) 300-5049**

Signature:



Associated Documents

403707579 - FORM 3A SUBMITTED

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