



## Form 3A - Financial Assurance

### Summary Information Overview

Form Name:	<b>Form 3A - Financial Assurance</b>
Document Number:	<b>403707578</b>
Date Submitted:	<b>3/5/2024</b>
Date Approved:	<b>8/11/2024</b>

### 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**

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

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

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

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

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

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

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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**

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

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

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

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

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## 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.**

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Operator Comments:

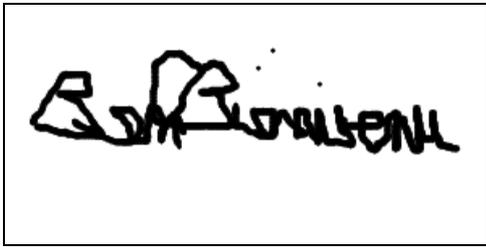
Name: **BENJAMIN BIENVENU**

Title: **OWNER/MANAGER**

Email: **ben@organicenergyco.com**

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

Signature:



## Associated Documents

403707579 - FORM 3A SUBMITTED

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