

## RECEIVED ADJUDICATION SECTION JUL 01 2025

MERRY G. BERNARD
Paralegal

201 St. Charles Avenue, 40th Floor New Orleans, LA 70170 MAIN 504.582.1111 mbernard@gamb.com

July 1, 2025

Ref: 6675-37317

### By email (boemadjudication@boem.gov)

Bureau of Ocean Energy Management Attention: Adjudication Section Gulf of Mexico OCS Region 1201 Elmwood Park Boulevard Mail Stop 276A New Orleans, LA 70123

Re: Adjudication filings – OCS-G 35724,

Walker Ridge Block 107, OCS-G 35894, Walker Ridge Block 106, OCS-G 35895, Walker Ridge Block 150, OCS-G 36926,

Walker Ridge Block 151

#### Ladies and Gentlemen:

Please find attached the following instrument for filing in your records:

Delaware UCC-1 No. 2025-4323082, Debtors: Talos Resources LLC (GOM No. 3065), Talos Petroleum, LLC (GOM No. 1834) and HEQ II Daenerys LLC (GOM No. 3757), and Secured Party: Shell Offshore Inc., (GOM No. 0689)

This document should be categorized under "No. 3, UCC Filings and Financial Statements".

Please file this letter, together with the attached instrument, in the non-required filings maintained for each of OCS-G 35724, OCS-G 35894, OCS-G 35895 and OCS-G 36926. Also submitted is a pay gov receipt for \$152 ( $$38 \times 4$ ) to cover the fees for filing this instrument.

Should you have any questions or need any additional information, please do not hesitate to contact me at mbernard@gamb.com.

Sincerely,

Merry G. Bernard

Paralegal

# RECEIVED ADJUDICATION SECTION JUL 01 2025

Merry Bernard 201 St. Charles Avenue, 40th Floor New Orleans, LA 70170-4000  SEE BELOW FOR SECURED PARTY CONTACT INFORMATION  DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor Information in Item 10 of the Financing Statement Addendum (Form UCC1Ad)  1a. ORGANIZATION'S NAME  Talos Resources LLC  1b. INDIVIDUAL'S SURNAME  FIRST PERSONAL NAME  ADDITIONAL NAME(S)/INITIAL(S)  SUFFIX  C. MAILING ADDRESS  DITY  STATE POSTAL CODE  COUNTRY	UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS  A. NAME & PHONE OF CONTACT AT SUBMITTER (options Merry Bernard (504-582-1111)  B. E-MAIL CONTACT AT SUBMITTER (optional)	al)	Delaware Department of State U.C.C. Filing Section Filed: 03:51 PM 96/16/2025 U.C.C. Initial Filing No: 2025 432				
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To GREANIZATION NAME  Talos Resources LLC  To INCURBULAL S SURNAME  LAMALING ADDRESS  CHAILING ADDRESS							
Talos Resources LLC  To INCENDUAL'S SURNAME  TO INCENDUAL'S SURNAME  TO INCENDUAL'S SURNAME  TO STATE  TO							rectors name war
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Talos Petroleum LLC  Za. ORGANIZATIONS NAME TALOS PETROLEUM LLC  Za. INDIVIDUAL'S SURNAME  ADDITIONAL NAME (SYMNITALIS)  SUFFIX  AMELING ADDRESS  SITY STATE POSTAL CODE COUNTRY TX 77002 USA  SECURED PARTY'S NAME (or NAME of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)  3a. GRIGANIZATIONS NAME Shell Offshore Inc.  3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME SHELLING ADDRESS  SITY STATE POSTAL CODE COUNTRY TX 77002 USA  SECURED PARTY'S NAME (or NAME of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)  3a. GRIGANIZATION'S NAME SHELLING ADDRESS	333 Clay Street, Suite 3300	3 '			<b>.</b>	-	3 '
Za. ORGANIZATION'S NAME Talos Petroleum LLC  Ze. INDIVIDUAL'S SURRAME  CHEY TALOS PETROLEUM STATE POSTAL CODE COUNTRY TX 77002 USA  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only gag Secured Party name (3a or 3b)  Sa. GRIGANIZATION'S NAME Shell Offshore Inc.  R  Shell Offshore Inc.  R  Jo. INDIVIDUAL'S SURRAME  FIRST PERSONAL NAME ADDITIONAL NAME(SYNITIAL(S)) SUFFIX  STATE POSTAL CODE COUNTRY TX 77002 USA  CHEY STATE POSTAL CODE COUNTRY TX 77002 USA  COLLATERAL: This financing statement covers the following collisteral:  All assets of each debtor.  Check gagy if applicable and check gagy one box: Check gagy if applicable and check gagy one box: Collateral is Party and Instructions)  Secure of Party is the postal code Secured Party name (3a or 3b)  Suffix TX 77002 USA  Check gagy if applicable and check gagy one box: Collateral is Party and Instructions)  Secure of Party is party instructions)  Secure of Party instructions S							ebtor's name will
Talos Petroleum LLC  25. INDM/DUAL'S SURNAME  CITY  HOUSTON  SCURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only gas Secured Party rame (3s or 3o)  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only gas Secured Party rame (3s or 3o)  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only gas Secured Party rame (3s or 3o)  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only gas Secured Party rame (3s or 3o)  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only gas Secured Party rame (3s or 3o)  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only gas Secured Party rame (3s or 3o)  SECURED PARTY'S NAME (3s		and provide the Individual Debtor into	mation in item:10 of the Financing	, Statement	. Addendum (For	m UCCTAd)	
25. NONDIDUAL'S SURNAME  C. MARLING ADDRESS CLEY HOUSTON TX 77002 USA  SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide orly gray Secured Party risme (3a or 3b) 3a. GROANIZATION'S NAME Shell Offshore Inc.  3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME Shell Offshore Inc.  3c. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(SYNNITIAL(S)) SUFFIX  STATE POSTAL CODE COUNTRY STATE FOSTAL CODE COUNTRY TX 77002 USA  CITY HOUSTON TX 77002 USA  COLLATERAL' This financing statement covers the following collateral:  All assets of each debtor.  Check crity if applicable and check crity one box  Collateral is Third in a Trust (soc UCC1Ad, deat 17 and Instructions)  Indicate the propileable and check crity one box  Check crity if applicable and check crity one box  Check crity if applicable and check crity one box  Check crity if applicable and check crity one box  Check crity if applicable and check crity one box  Check crity if applicable and check crity one box  Check crity if applicable and check crity one box  Check crity if applicable and check crity one box  Check crity if applicable and check crity one box  Check crity if applicable and check crity one box	Talos Petroleum LLC						
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Shell Offshore Inc.  Shell Off	333 Clay Street, Suite 3300	Houston		TX	77002		USA
Shell Offshore Inc.    Shell Offshore Inc.		SIGNOR SECURED PARTY): Provide of	nly <u>one</u> Secured Party name (3a	or 3b)			
E. MAILING ADDRESS  CITY HOUSTON TX  POSTAL CODE COUNTRY USA  COLLATERAL: This financing statement covers the following collateral:  All assets of each debtor.  Check pply if applicable and check only one box:  Collateral is held in a Trust (see UCC1As), (cm 17 and instructions)  being administered by a Decedent's Personal Representative  8. Check only if applicable and check only one box:	Shell Offshore Inc.						
50 N. Dairy Ashford Houston TX 77002 USA  COLLATERAL: This financing statement covers the following collateral:  All assets of each debtor.  Check gnly if applicable and check gnly one box: Collateral is held in a Trust (see UCC1Ad, item 17 and instructions) being administered by a Decedent's Personal Representative 8. Check gnly if applicable and check gnly one box:	3b, INDIVIDUAL'S SURNAME	FIRST PERSONAL N	AME	ADDITION	IAL NAME(S)AN	NITIAL(S)	SUFFIX
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			ing. Ch	eck <u>only</u> if	applicable and r	анеск <u>опку</u> оле	DOX:

### UCC FINANCING STATEMENT ADDITIONAL PARTY FOLLOW INSTRUCTIONS

B. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing because Individual Debter name did not fit, check here	ensecutives at 1800 and 1900 to the MICHES			
18a. ORGANIZATION'S NAME				
Talos Resources LLC				
18b. INDIVIDUAL'S SURNAME				
FIRST PERSONAL NAME				
ADDITIONAL NAME(S)INITIAL(S)	SUFFIX	Print	Res	eat
		HE ABOVE SPACE IS F		
D. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor name	ne (19a or 19b) (use exact, full name; de not omit, modi	fy, or abbreviate any part of t	se Deblor's name)	
19a, ORGANIZATION'S NAME				
HEQ II Daenerys, LLC	FIRST PERSONAL NAME	ADDITIONAL	NAME(S)/INITIAL(S)	SUFFIX
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c. MAILING ADDRESS	СіТУ	t 1	STAL CODE	COUNTR
200 Smith Street, Suite 2400	Houston	TX 7	7002	USA
D. ADDITIONAL DEBTOR'S NAME: Provide only one Debtor nar	ne (20a or 20b) (use exact, full name; do not emit, modi	fy, or abbreviate any part of t	ne Debtor's name)	
20a. ORGANIZATION'S NAME				
R 20b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL.	NAME(S)/INITIAL(S)	SUFFIX
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R 21b, INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL	NAME(S)/INITIAL(S)	SUFFIX
ic. MAILING ADDRESS	CITY	STATE PO	STAL CODE	COUNTR
2. ADDITIONAL SECURED PARTY'S NAME OF	ASSIGNOR SECURED PARTY'S NAME	: Provide only <u>one</u> name (22	ta or 22b)	
22a, ORGANIZATION'S NAME				
R 225. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL	NAME(S)/INITIAL(S)	SUFFEX
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tc. MAILING ADDRESS	CATY	0		1
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