

O'HANLON, DEMERATH & CASTILLO

ATTORNEYS AND COUNSELORS AT LAW

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February 8, 2019

Local Government Assistance & Economic Analysis
Texas Comptroller of Public Accounts
P.O. Box 13528
Austin, Texas 78711-3528

RE: (1329) Supplement001 to Buena Vista Independent School District from Concho Bluff LLC.

To the Local Government Assistance & Economic Analysis Division:

Enclosed is Supplement001 to Buena Vista ISD from Concho Bluff LLC. The following changes have been made:

1. Section 1: School District Information (Continued) Updated School District Consultant

A copy of the application will be submitted to the Pecos County Appraisal District.

Sincerely,



Kevin O'Hanlon
School District Consultant

Cc: Pecos County Appraisal District
Concho Bluff LLC

Texas Comptroller of Public Accounts

SECTION 1: School District Information *(continued)*

3. Authorized School District Consultant *(If Applicable)*

<u>Dan</u> First Name	<u>Casey</u> Last Name
<u>Partner</u> Title	
<u>Moak, Casey & Associates</u> Firm Name	
<u>(512) 485-7878</u> Phone Number	<u>(512) 485-7888</u> Fax Number
	<u>dcasey@moakcasey.com</u> Email Address
<u>Mobile Number (optional)</u>	

4. On what date did the district determine this application complete?

5. Has the district determined that the electronic copy and hard copy are identical? Yes No

SECTION 2: Applicant Information

1. Authorized Company Representative *(Applicant)*

<u>Ian</u> First Name	<u>Davis</u> Last Name
<u>Authorized Representative</u> Title	<u>Concho Bluff, LLC</u> Organization
<u>2028 E. Ben White Blvd Suite 240-8833</u> Street Address	
<u>2028 E. Ben White Blvd Suite 240-8833</u> Mailing Address	
<u>Austin</u> City	<u>TX</u> State
<u>(512) 568-3228 ext: 701</u> Phone Number	<u>78741</u> ZIP
	<u>idavis@onpeakpower.com</u> Business Email Address
<u>Mobile Number (optional)</u>	

2. Will a company official other than the authorized company representative be responsible for responding to future information requests? Yes No

2a. If yes, please fill out contact information for that person.

<u>First Name</u>	<u>Last Name</u>
<u>Title</u>	<u>Organization</u>
<u>Street Address</u>	
<u>Mailing Address</u>	
<u>City</u>	<u>State</u>
<u>Phone Number</u>	<u>ZIP</u>
	<u>Fax Number</u>
<u>Mobile Number (optional)</u>	<u>Business Email Address</u>

3. Does the applicant authorize the consultant to provide and obtain information related to this application? Yes No