SEC Form 4
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## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

3235-0287 OMB Number: Estimated average burden 0.5 hours per response:

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934
or Section 30(h) of the Investment Company Act of 1940

1. Name and A Jarchow C	ddress of Reporting	Person*		er Name <b>and</b> Ticke <u>Energy, Inc.</u>	0	ymbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(Last) (First) (Middle)				ction (Month/D	Day/Year)		Officer (give title below)		(specify		
521 E. 2ND	STREET, SUITI	E 1000	4. If An	nendment, Date of	Original Filed	(Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)							X	X Form filed by One Reporting Person				
TULSA	OK	74120						Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Rule	Rule 10b5-1(c) Transaction Indication								
				Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								
		Table I - Nor	n-Derivative S	ecurities Acq	uired, Disp	osed of, or Benefi	cially	Owned				
1. Title of Secu	ırity (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date,	3. Transaction	4. Securities Acquired (A Disposed Of (D) (Instr. 3,		5. Amount of Securities Beneficially	6. Ownership Form: Direct	7. Nature of Indirect Beneficial		

Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Code (Instr.					Securities Beneficially Owned Following	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership
		Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of I		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Deferred Stock Units	(1)	11/02/2023		A		638		(2)	(2)	Common Stock	638	\$0	5,970	D	

Explanation of Responses:

1. These shares are granted under the Issuer's Omnibus Equity Incentive Plan and represent partial payment of the director's retainer and director fees.

2. These deferred stock units are granted under the Issuer's Omnibus Equity Incentive Plan and represent partial payment of the director's retainer and director fees. Each deferred stock unit represents the right to receive one share of common stock of the Issuer

## **Remarks:**

/s/ Mark D. Denny as attorney-11/03/2023 in-fact for Craig M. Jarchow

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $\ast$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

OMB APPROVAL