Edgar Filing: LORENZ ROBERT O - Form 4

LORENZ RC	BERT O											
Form 4												
January 08, 2	018											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL				
. •	 UNITED S 	STATES S					NGE CO	OMMISSION	OMB	3235-0287		
Check this	s box		wasi	hington,	D.C. 20	549			Number: Expires:	January 31,		
if no longer				TES IN I	ES IN BENEFICIAL OWNERSHIP OF					2005		
subject to				GES IN BENEFICIAL OWNERSI SECURITIES					Estimated average			
Section 16 Form 4 or				BLCCK					burden hours per response 0.5			
Form 5	Filed purs	uant to Se	ction 16	(a) of the	Securit	ies E	xchange	Act of 1934,	10000100	0.0		
obligation may conti	^s Section $17(a$						-	1935 or Section				
See Instru		30(h) of	f the Inv	restment	Compan	y Ac	t of 1940)				
1(b).												
	`											
(Print or Type R	esponses)											
1. Name and Ad	dress of Reporting P	erson *	2 Issuer	Name and	Ticker or '	Tradir	ng	5. Relationship of I	Reporting Pers	on(s) to		
1. Name and Address of Reporting Person *2. IssueLORENZ ROBERT OSymbol				8				Issuer				
			-	ANDLE OIL & GAS INC								
		[]	PHX]					(Check	all applicable)		
(Last)	(First) (M	iddle) 3	. Date of]	Earliest Tra	insaction			X Director	10%	Owner		
				nth/Day/Year)			Officer (give title Other (specify					
5400 N. GRA	AND BLVD, STH	E. 300 1	2/31/20	17				below)	below)			
			. If Amen	led(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
								X Form filed by Or Form filed by Mo				
OKLAHOM	A CITY, OK 731	12					:	Person		porting		
(City)	(State) (Zip)	Table	I - Non-De	erivative S	Securi	ities Acqu	ired, Disposed of,	or Beneficial	v Owned		
1.Title of	2. Transaction Date	2A Deeme		3.			-	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year) Execution Date, i			ate, if Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Securities	Ownership	Indirect		
(Instr. 3) any (Month/Day/Year								Beneficially	Form: Benefici Direct (D) Ownersh or Indirect (Instr. 4)	Beneficial		
			ay/Year) (Instr. 8)					Owned Following				
						(A)		Reported	(I)	(
						(A) or		Transaction(s)	(Instr. 4)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Panhandle	10/01/0017	01/01/02	10	. (1)	1,703	А	\$		D			
Class A	12/31/2017	01/04/20	18	$A^{(1)}$	<u>(1)</u>	(1)	0.0167 (1)	16,761 <u>(2)</u>	D			
Common							(1)					

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Reporting Owners

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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. Transactic Code (Instr. 8)	of		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	Other				
LORENZ ROBERT O 5400 N. GRAND BLVD, STE. 300 OKLAHOMA CITY, OK 73112	Х							
Signatures								
Robert O. Lorenz, by Lonnie J. Lown in Fact	ry, Attorn	ey	01/0	8/2018				
**Signature of Reporting Person			D	ate				

Explanation of Responses:

- 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). **
- Amount represents the number of shares of restricted stock granted under the Amended Panhandle Oil and Gas 2010 Restricted Stock (1) Plan. The shares will vest one-forth each calendar quarter.
- (2) Total number of shares includes restricted shares with vesting based on elapsed time.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.