## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPE	ROVAL
OMB Number:	3235-0287
Estimated average	burden
houre par raepanea	0.5

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Ty	pe Response	s)														
1. Name and Address of Reporting Person * Fowler David A.			2. Issuer Name and Ticker or Trading Symbol RING ENERGY, INC. [REI]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
(Last) (First) (Middle) 4600 HILLTOP DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 12/14/2016							X_ Officer (give title below) Other (specify below) President					
MIDLAN	ND, TX 79	(Street)		4. If Amo	endn	nent, Date	e Orig	ginal Filed(M	Ionth/Day	//Year)		Form filed by	One Reporting	p Filing(Check Person Reporting Person	Applicable Line	*)
(Cit	y)	(State)	(Zip)	Table I - Non-Derivative Securities Acqui						es Acquire	ired, Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)		on I	Date, if		8) ((	A) or D	ities Acq Disposed (c, 4 and 5) (A) or (D)	of (D) Ov Tra		Securities Be ring Reported	d C F I C	Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership Instr. 4)
			Table II -					in this display uired, Disp	form a	re not r rrently or Bene	equired to valid OMI eficially Ov	o respond 3 control r	unless the	tion contain	su sec i	474 (9-02)
		3. Transaction Date Execution Date, if (Month/Day/Year) (Month/Day/Year)			4. 5. Nu of Do Code Security (Instr. 8) Acquired or Di of (Do Code Secur		Number Derivative Expiratic (Month/I Disposed (D) str. 3, 4,		on Date /Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownersh Form of Derivativ Security: Direct (D or Indirects)	Beneficial Ownershi (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable		ration	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Options	\$ 11.75	12/14/2016		P		50,000		<u>(1)</u>	12/1	4/2026	Commo	on 50,000	\$ 0	645,000	D	

#### **Reporting Owners**

D. C. O. N.	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Fowler David A.						
4600 HILLTOP DRIVE	X		President			
MIDLAND, TX 79707						

### **Signatures**

/s/ David A. Fowler	12/16/2016
Signature of Reporting Person	Date

#### **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).
- (1) Options vest 20% per year over 5 years.

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.