

(Print or Type Responses)

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

OMB APPROVAL					
OMB Number:	3235-0104				
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nours per response	e 0.5				

INITIAL STATEMENT OF 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

Name and Address of Reporting Person * HARLAND MICHAEL F		2. Date of Event Requiring Statement (Month/Day/Year) 05/31/2008		3. Issuer Name and Ticker or Trading Symbol RING ENERGY, INC. [RNGE.OB]					
301 9TH STREET,	BOX 400,	(Middle) SUITE 412			4. Relationship of Issuer	1 0	\ /	5. If Amendment, Date Original Filed(Month/Day/Year)	
REDLANDS, CA 9	Street) 2373				(Check all applicable) X_ Director		cify Applicable 1 _X_ Form f	6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting PersonForm filed by More than One Reporting Person	
(City) (S	State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned						
1.Title of Security (Instr. 4)				Ве	Amount of Seneficially Ovnstr. 4)	vned		4. Nature of Indire (Instr. 5)	ct Beneficial Ownership
Common Stock			45	450,000 (1)		D			
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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 4)	and	2. Date Exercisable and Expiration Date Month/Day/Year)		3. Title and Amount of Securities Underlying Derivativ Security (Instr. 4)		Price of Derivative	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercis	te ercisable	Expiration Date	Title Amou	unt or Number of s	Security	(D) or Indirect (I) (Instr. 5)		
		LX		240	Snare	S		(Instr. 5)	

Reporting Owners

Reporting Owner Name / Address		Relationships				
		10% Owner	Officer	Other		
HARLAND MICHAEL F 301 9TH STREET, BOX 400, SUITE 412 REDLANDS, CA 92373	X					

Signatures

Michael F. Harland	06/12/2008
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) Restricted

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.