#### Edgar Filing: Petrie Thomas A. - Form 4

| Petrie Thomas  | s A.                                    |  |   |  |             |                  |   |  |  |                      |  |
|--|---|--|---|--|-------------|------------------|---|--|--|----------------------|--|
| Form 4   |   |  |   |  |             |                  |   |  |  |                      |  |
| December 17,   | 2018                                    |  |   |  |             |                  |   |  |  |                      |  |
| FORM   | 4 UNITED S                              | STATES   |   |  |             |                  | NGE (   | COMMISSION   | OMB  | 9PROVAL<br>3235-0287 |  |
| Check this box<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or   |   |  |   | <ul> <li>Schington, D.C. 20549</li> <li>GES IN BENEFICIAL OWNERSHIP OF SECURITIES</li> <li>6(a) of the Securities Exchange Act of 1934,</li> </ul> |             |                  |   |  | Number:DescriptionExpires:January 31Expires:200Estimated averageburden hours perresponse0. |                      |  |
| obligations<br>may contir<br><i>See</i> Instruct<br>1(b).                  | Section 17(a                            | a) of the P  | ublic Uti                               |  | ing Com     | pany             | Act o   | f 1935 or Sectio   | on   |                      |  |
| (Print or Type Re  | esponses)                               |  |   |  |             |                  |   |  |  |                      |  |
| Petrie Thomas A. Symbol  |   |  |   | Name and Ticker or Trading ch & Payne, Inc. [HP]   |             |                  |   | 5. Relationship of Reporting Person(s) to Issuer                         |  |                      |  |
|  |   |  |   | •  | _           | 111 ]            |   | (Check all applicable)   |  |                      |  |
| 1437 S. BOULDER AVE.       (Month/Data)         (Street)       4. If Ameri |   |  |   | te of Earliest Transaction<br>th/Day/Year)<br>4/2018   |             |                  |   | XDirector10% Owner<br>Officer (give titleOther (specify<br>below) below) |  |                      |  |
|  |   |  | endment, Date Original<br>nth/Day/Year) |  |             |                  | <ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul> |  |  |                      |  |
| TULSA, OK  | 74119                                   |  |   |  |             |                  |   | Form filed by Person   | More than One Ro   | eporting             |  |
| (City)   | (State)                                 | (Zip)  | Table                                   | I - Non-De   | erivative S | ecuri            | ties Ac   | quired, Disposed o   | f, or Beneficia  | lly Owned            |  |
| 1.Title of<br>Security<br>(Instr. 3)                                       | 2. Transaction Date<br>(Month/Day/Year) | ansaction Date 2A. Deemed<br>hth/Day/Year) Execution Date, if<br>any<br>(Month/Day/Year) |   | 3. 4. Securities<br>TransactionAcquired (A) or<br>Code Disposed of (D)<br>(Instr. 8) (Instr. 3, 4 and 5)   |             |                  | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported  | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4)     | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)                          |                      |  |
|  |   |  |   | Code V   | Amount      | (A)<br>or<br>(D) | Price   | Transaction(s)<br>(Instr. 3 and 4)                                       |  |                      |  |
| Common<br>Stock  | 12/14/2018                              |  |   | A  | 2,963       | A                | \$ 0  | 14,297   | 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 Acquired, Disposed of, or Beneficially Owned

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

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivativ<br>Securitie<br>Acquirec<br>(A) or<br>Disposec<br>of (D)<br>(Instr. 3,<br>4, and 5) | Expiration D<br>(Month/Day,<br>ve<br>ss<br>i |                    |  | <ul><li>8. Price of<br/>Derivative<br/>Security<br/>(Instr. 5)</li><li>4)</li></ul> | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owno<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|--|---|--|--------------------|--|---|--|
|   |   |   | Code V                                 | (A) (D)   | Date Exercisable                             | Expiration<br>Date | Title Amoun<br>or<br>Numbo<br>of<br>Shares | er  |  |

## **Reporting Owners**

|                                 | Relationsh     | ups                     |                 |  |  |
|---------------------------------|----------------|-------------------------|-----------------|--|--|
| Director                        | 10% Owner      | Officer                 | Other           |  |  |
| Х                               |                |                         |                 |  |  |
|                                 |                |                         |                 |  |  |
| orney for                       | Thomas A.      |                         | 12/17/2018      |  |  |
| **Signature of Reporting Person |                |                         |                 |  |  |
|                                 | X<br>prney for | Director 10% Owner<br>X | X for Thomas A. |  |  |

# **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).

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.