Fitzgerald Robert N Form 4 January 15, 2013

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

0.5

January 31, Expires: 2005

Estimated average burden hours per

**OMB APPROVAL** 

response...

subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction

Check this box

if no longer

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

01/11/2013

Stock

1(b).

1. Name and Address of Reporting Person * Fitzgerald Robert N			er Name <b>and</b> Ticker or Trading	5. Relationship o Issuer	5. Relationship of Reporting Person(s) to Issuer				
~ · ·	<b>67</b> 1		coup Corp [SEMG]	(Che	(Check all applicable)				
(Last)	(First) (N	Middle) 3. Date of	of Earliest Transaction						
		(Month/	Day/Year)	Director	10% Owner				
6120 S. YA	LE, SUITE 700	01/11/2	2013	_X_ Officer (giv	re title Other (specify below)				
				below) Sen	ior VP and CFO				
	(Street)	4. If Am	endment, Date Original	6. Individual or J	6. Individual or Joint/Group Filing(Check				
		Filed(Mo	onth/Day/Year)	Applicable Line)	, 0,				
		`	•	**	One Reporting Person				
TULSA, OK 74136				Form filed by Person	Form filed by More than One Reporting Person				
(City)	(State)	(Zip) Tab	ole I - Non-Derivative Securities	Acquired, Disposed o	of, or Beneficially Owned				
1.Title of	2. Transaction Date	e 2A. Deemed	3. 4. Securities Acqui	red 5. Amount of	6. Ownership 7. Nature of				
Security	(Month/Day/Year)	Execution Date, if	-		Form: Direct Indirect				
(Instr. 3)		any	Code (Instr. 3, 4 and 5)	Beneficially	(D) or Beneficial				
		(Month/Day/Year)	(Instr. 8)	Owned	Indirect (I) Ownership				
				Following	(Instr. 4) (Instr. 4)				
			(A)	Reported					
			or	Transaction(s)					
			Code V Amount (D) F	rice (Instr. 3 and 4)					
Common	01/11/2013		F 2602 D \$	28 840	D				

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

F

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

D

28,849

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

2.602 D

#### Edgar Filing: Fitzgerald Robert N - Form 4

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	ınt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative		•		Securities	3		(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(2.11541
					4, and 5)						
					i, and 3)						
									Amount		
						Data	Evaluation		or		
						Date Exercisable	Expiration Date	Title	Number		
									of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Fitzgerald Robert N 6120 S. YALE SUITE 700 TULSA, OK 74136

Senior VP and CFO

## **Signatures**

Candice L. Cheeseman, Power of Attorney for Robert N. Fitzgerald

01/15/2013

\*\*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).

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.

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