SALAS PETER E Form 4 January 04, 2018

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

January 31, 2005

0.5

Estimated average burden hours per

**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box

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

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

See Instruction

SALAS PETER E		Symbol	Symbol TENGASCO INC [TGC]					Issuer				
(Last)	(First) (N		3. Date of Earliest Transaction			(Check all applicable)						
P.O. BOX		(Month/Day/Year) 01/02/2018				Director Officer (g		0% Owner Other (specify				
(Street) 4. If Amendment, Date Origin Filed(Month/Day/Year)				•	ıl	<ul><li>6. Individual or Joint/Group Filing(Check</li><li>Applicable Line)</li><li>Form filed by One Reporting Person</li></ul>						
FERNAND	INA BEACH, FL	. 32035						_X_ Form filed by More than One Reporting Person				
(City)	(State) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code	4. SecurionAcquirec Disposec (Instr. 3,	l (A) of l of (D) 4 and (A) or	))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common Stock	01/02/2018		<u>J(1)</u>	500	A	\$0	4,000	D				
Common Stock							5,288,241	I	By Affiliate Partnership			

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

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	onNumber	Expiration D	ate	Amou	nt 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	;		(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A 4		
									Amount		
						Date Expiration Exercisable Date	Expiration		Or		
							Title Number				
				C-1- V	(A) (D)				of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SALAS PETER E
P.O. BOX 16867
FERNANDINA BEACH, FL 32035
DOLPHIN OFFSHORE PARTNERS LP
P.O. BOX 16867

P.O. BOX 16867 FERNANDINA BEACH, FL 32035

## **Signatures**

/s/ Dolphin Offshore Partners, L.P. 01/04/2018

\*\*Signature of Reporting Person Date

/s/ Peter E. Salas 01/04/2018

\*\*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) Grant of stock pursuant to Tengasco, Inc.'s Stock Incentive Plan to Peter E. Salas in his individual capacity.
- (2) Held directly by Dolphin Offshore Partners L. P. Peter E. Salas, the chairman of Tengasco Inc.'s Board of Directors, is the sole shareholders and controlling person of Dolphin Mgmt. Services, Inc., the managing general partner of Dolphin Offshore Partners, L.P.

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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