FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

| 1. Name and Address of Reporting Person* MITCHELL THOMAS L | | | 2. Issuer Name and Ticker or Trading Symbol <u>RING ENERGY, INC.</u> [REI] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|----------------|----------|---|--|---|--------------------------|--|--|--|
| MITCHELL II | <u>HOMAS L</u> | | ,,,,,,,,,, | X | Director | 10% Owner | | | |
| (Last) | (First) | (Middle) | | | Officer (give title below) | Other (specify below) | | | |
| 1725 HUGHES LA | () | (Midule) | 3. Date of Earliest Transaction (Month/Day/Year) 02/12/2025 | | | , | | | |
| (Street) THE WOODLANDS | DS TX 77380 | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indivi X | dual or Joint/Group Filing Form filed by One Repo Form filed by More thar | orting Person | | | |
| (City) | (State) | (Zip) | | | | | | | |

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) | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|---|---|---|--|---------------|---------------------------|--|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 02/12/2025 | | Α | | 91,463 | Α | \$0 ⁽¹⁾ | 464,125 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

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

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Code (Instr. 8) | | Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | Derivative Security (Instr. 5) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|--|---|--|---|-----------------------------------|---|------------|-----|--|--------------------|--|----------------------------------|--------------------------------------|------------------------------|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |

Explanation of Responses:

1. This restricted stock unit award vests on February 12, 2026, subject to the terms of the restricted stock unit agreement. Each restricted stock unit represents the contingent right to receive one share of common stock of the Issuer.

/s/ Thomas L. Mitchell

** Signature of Reporting Person

02/14/2025

Date

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

* 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.

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 Number.