Owens William F

Form 3

January 08, 2010								
FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION						OMB APPROVAL		
	Washington, I	D.C. 20549			OMB Number:	3235-0104		
INITIAL	STATEMENT OF BEN		OWNERSH	IIP OF	Expires:	January 31,		
SECURITIES					Estimated a burden hou			
Section 17(a) o	nt to Section 16(a) of the f the Public Utility Holdi 30(h) of the Investment C	ng Company	Act of 193		response	•		
(Print or Type Responses)								
1. Name and Address of Reporting Person <u>*</u> Owens William F	2. Date of Event Requiring Statement (Month/Day/Year)		e and Ticker of EAK ENER					
(Last) (First) (Middle)	01/05/2010	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)			
505 S. GILLETTE AVE.								
(Street)	(Street) (Check all applica		all applicable)	6.]	Individual or Join	nt/Group		
GILLETTE, WY 82716		X Director Officer (give title below	Other	r _X ow) Per	ing(Check Applica _ Form filed by On son _ Form filed by Mo porting Person	e Reporting		
(City) (State) (Zip)	Table I - N	Non-Derivat	ive Securiti	ies Benef	icially Owned	d		
1.Title of Security (Instr. 4)	2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature Ownershi (Instr. 5)	of Indirect Bene p	ficial		
Common Stock	500		D	Â				
information con required to resp	each class of securities benefic spond to the collection of tained in this form are not bond unless the form displ OMB control number.	t S	EC 1473 (7-02	2)				
Table II - Derivative Sec	urities Beneficially Owned (e	.g., puts, calls,	warrants, opt	tions, conv	ertible securitie	s)		

1. Title of Derivative Security	2. Date Exercisable and		3. Title and	. Title and Amount of		5.	6. Nature of Indirect
(Instr. 4)	(Month/Day/Year)		Securities Underlying		Conversion	Ownership	Beneficial Ownership
			Derivative Security		or Exercise	Form of	(Instr. 5)
			(Instr. 4)		Price of	Derivative	
	DateExpirationExercisableDate	Evaluation	T:41-	A	Derivative	Security:	
		The	Amount or Number of	Security	Direct (D)		
			Number of		or Indirect		

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Shares

(I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address			Relationsh				
		ctor	10% Owner	Officer	Other		
Owens William F 505 S. GILLETTE AVE. GILLETTE, WY 82716	Â	X	Â	Â	Â		
Signatures							
/s/ Amy J. Stefonick, attorney-in-fact for William F. 01/08/2010 Owens							
<u>**</u> Signature of Report	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).

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.