FLOTEK INDUSTRIES INC/CN/

Form 4/A June 06, 2008

FORM 4

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

washington, D.C. 20349

Expires: January 31, 2005

OMB APPROVAL

Section 16.
Form 4 or
Form 5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per

5. Relationship of Reporting Person(s) to

Issuer

 $125,184 \stackrel{(2)}{=}$

20,470

D

I

Form 5 obligations may continue. *See* Instruction

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

Symbol

response... 0.5

1(b).

Common

Common

Stock

Stock

(Print or Type Responses)

CHISHOLM JOHN

1. Name and Address of Reporting Person *

		F	FLOTEK INDUSTRIES INC/CN/ [FTK]				(Check all applicable)				
(Last) (First) (Middle) 539 GREEN ISLE BEACH			3. Date of Earliest Transaction (Month/Day/Year) 12/11/2007				_X_ Director 10% Owner Officer (give title below) Other (specify below)				
I			4. If Amendment, Date Original Filed(Month/Day/Year) 12/13/2007				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non	-Derivativ	e Seci	urities Ac	quired, Disposed	l of, or Benefi	cially Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	e 2A. Deemed Execution Da any (Month/Day/Y	Code	4. Securion(A) or D (Instr. 3,	ispose 4 and (A) or	ed of (D)	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	12/10/2007		S	4,900 (1)	D	\$ 39.35	221,470	I	Chisholm Energy Partners		
Common Stock	12/10/2007		S	100 (1)	D	\$ 39.38	221,370	I	Chisholm Energy Partners		

ProTechnics

II

Edgar Filing: FLOTEK INDUSTRIES INC/CN/ - Form 4/A

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.

SEC 1474 (9-02)

> 9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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.	Date Exerc	cisable and	7. Title a	and	8. Price of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Da	ate	Amount	of	Derivative	
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underlyi	ing	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	
	Derivative				Securities			(Instr. 3	and 4)		
	Security				Acquired						
					(A) or						
					Disposed						
					of (D)						
					(Instr. 3,						
					4, and 5)						
								Δ	mount		
								or			
						Date	Expiration	Title N			
						Exercisable	Date	of			
				Code V	(A) (D)				hares		
					(1-)			- 01			

Reporting Owners

	Relationships
Reporting Owner Name / Address	•

Director 10% Owner Officer Other

CHISHOLM JOHN
539 GREEN ISLE BEACH
MONTGOMERY, TX 77369

Signatures

/s/ John W. Chisholm 06/06/2008

**Signature of Date
Reporting Person

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) Sales part of Rule 10b-5 Plan March 20, 2007
- (2) The amount of securities beneficially owned by the reporting person disclosed in the original Form 4 did not include include a restricted stock award that was incorrectly classified in Table II as a derivative security.

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.

Reporting Owners 2