longer subject to

Section 16. Form 4 or

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

OMB APPROVAL OMB 3235-Number: 0287 Estimated average burden hours per response.

Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Instruction 1(b). Section 30(h) of the Investment Company Act of 1940

(Print or Type Respo	nses)								
Name and Address Cook Connie	s of Reporting Perso	Symbol ARABIAN	ame <b>and</b> Tick  NAMERICA  PMENT CO	AN	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
(Last) 247 PR 8894	(First) (Middle	3. Date of Ea (Month/Day, 01/12/2011		ction					
FRED, TX 77616	Street)	4. If Amenda Filed(Month/E	ment, Date O	riginal	6. Individual or Joint/Group Filing(Cheek Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(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)  (A) or Amount (D) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership		
Reminder: Report or directly or indirectly.		ach class of securition	Po in re	ersons who respo	nd to the collection ed in this form are r l unless the form dis	ot	SEC 1474 (9-02)		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  $(\textit{e.g.}, \, \text{puts}, \, \text{calls}, \, \text{warrants}, \, \text{options}, \, \text{convertible securities})$ 

1. Title of	2.	<ol><li>Transaction</li></ol>	<ol><li>3A. Deemed</li></ol>	4.		<ol><li>Numb</li></ol>	er	<ol><li>Date Exercisal</li></ol>	ole and	<ol><li>Title and</li></ol>	Amount	<ol><li>Price of</li></ol>	<ol><li>Number of</li></ol>	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	tion	of		Expiration Date		of Underlyi	ing	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Derivativ	ve	(Month/Day/Yea	ır)	Securities	_	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	)	Securitie	s	-		(Instr. 3 and	d 4)	(Instr. 5)	Beneficially	Derivative	Ownership
,	Derivative					Acquired	1			Ì		, i	Owned	Security:	(Instr. 4)
	Security					(A) or							Following	Direct (D)	
	•					Dispose	d of						Reported	or Indirect	
						(D)							Transaction(s)	(I)	
						(Instr. 3,	4,						(Instr. 4)	(Instr. 4)	
						and 5)							· /	,	
											Amount				
											or				
									Expiration	Title	Number				
								Exercisable	Date	Title	of				
				Code	V	(A)	(D)				Shares				
C41-						()	(-)								
Stock															
Option	\$ 4.86	01/12/2011		Α		58,650		01/12/2012(1)	01/12/2021	Common	58 650	$\mathfrak{e} \cap (2)$	73,650	D	
(Right	Ψ 4.00	01/12/2011		7.1		<u>(1)</u>		01/12/2012-	01/12/2021	Stock	30,030	\$ U	73,030	Ъ	
to Buy)															
to Day)															

### **Reporting Owners**

Donouting Orynon Nome / Address	Relationships							
Reporting Owner Name / Address		Director 10% Owner Officer						
Cook Connie								
247 PR 8894			Chief Financial Officer					
FRED, TX 77616								

## **Signatures**

Connie J. Cook	05/24/2011
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).
- $\textbf{(1)} \ \ 14,662 \ stock \ options \ vest \ on \ 01/12/2012 \ and \ 01/12/2014 \ respectively; \ and \ 14,663 \ stock \ options \ vest \ on \ 01/12/2013 \ and \ 01/12/2015 \ respectively; \ for \ a \ total \ of \ 58,650.$
- (2) Granted as employee compensation

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.