## FORM 4

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

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)												
1. Name and Address of Reporting Person * CRAWFORD CRAIG			2. Issuer Name and Ticker or Trading Symbol EnergyTEK Corp. [ENTK]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director  10% Owner					
`	(Last) (First) (Middle) 201 S. LAUREL			3. Date of Earliest Transaction (Month/Day/Year) 11/05/2015					X Officer (give title below) Other (specify below)  CFO					
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line)  _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
	G, TX 7864	8												
(City	<i>i</i> )	(State)	(Zip)	Ta	able I - No	n-De	rivative S	ecurities	Acqui	red, Dispo	osed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Following	Ownership o Form: B	Beneficial
				(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	and 4)		\ /	Ownership (Instr. 4)
Commor	n Stock		11/05/2015		A		100,000		\$ 0.05	118,812	2		D	
		separate inic	for each class of secur			Pers con the	sons who tained in form disp	respon	m are	not requ ntly valid		ormation spond unle rol numbe	ss	1474 (9-02)
1. Title of Derivative	1			Derivative Securit (e.g., puts, calls, wa						ly Owned				

#### **Reporting Owners**

D 41 0 N 4	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
CRAWFORD CRAIG 201 S. LAUREL LULING, TX 78648	X		CFO			

### **Signatures**

/s/ Craig Crawford	11/09/2015
**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).

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.