Edgar Filing: HKN, Inc. - Form 4

HKN, Inc.												
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January 08, 2	2008											
FORM	14									PPROVAL		
	• • UNITED) STATES		ITIES Al hington,			NGE (COMMISSION	OMB Number:	3235-0287		
Check thi if no long subject to Section 1 Form 4 o	GES IN I SECUR		burden hou	Expires: January 31 2005 Estimated average burden hours per response 0.5								
Form 5 obligation may cont See Instru 1(b).	Filed pu ns Section 17	(a) of the		ility Hold	ing Com	pany	Act of	e Act of 1934, f 1935 or Sectio 40		0.5		
(Print or Type F	Responses)											
1. Name and Address of Reporting Person <u></u> LYFORD INVESTMENTS ENTERPRISES LTD			2. Issuer Name and Ticker or Trading Symbol HKN, Inc. [HKN]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Check all applicable)				
TROPIC ISI BOX 3331	LE BUILDING	, P.O.	(Month/Da 01/07/20	-				Director Officer (give below)	title $\underline{X}_{10\%}$ Other below)	% Owner er (specify		
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
Filed ROAD TOWN,				th/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
	, D8 VG1110							Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Execution any		3. Transactic Code (Instr. 8)		spose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock	01/07/2008			Р	5,900	А	\$ 8.06	3,047,368	D			

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.

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

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

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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)	4. Transacti Code (Instr. 8)	5. 6. Date Exercisable onNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Addr	Relationships						
		Director	10% Owner	Officer	Other		
LYFORD INVESTMENTS ENTERP TROPIC ISLE BUILDING P.O. BOX 3331 ROAD TOWN, TORTOLA, D8 VG1		Х					
Signatures							
Alan G. Quasha, Attorney-in-Fact	01/08/2008						
**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.