FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPI	ROVAL						
OMB Number:	Number: 3235-0104						
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  SARUBBI KIMBERLY  2. Date of Event Requiring States (Month/Day/Yea 07/27/2009				nent	3. Issuer Name and Ticker or Trading Symbol  CROFF ENTERPRISES INC [ COFF ]							
(Last) 8 CORRAL DI	(First)	(Middle)				ionship of Reporting all applicable) Director	g Person	. ,		5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street) HENDERSON		89052			X	Officer (give title below)	71	Other (spe below)			icable Line) Form filed b	/Group Filing (Check y One Reporting Person y More than One erson
(City)	(State)	(Zip)	able I - Non	- Derivati	ive Se	curities Benef	icially	, Owned				
1. Title of Security (Instr. 4)				2.	. Amour	nt of Securities ally Owned (Instr. 4	1)	3. Ownership		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock						4,108,107		I		Shares held by Saddle Ranch Productions, Inc.		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable an Expiration Date (Month/Day/Year)			ate	nd 3. Title and Amount of Securities Underlying Derivative Security (Inst				Instr. 4) Conver		5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	Title			Amount or Number of Shares	Price of Derivative Security		Direct (D) or Indirect (I) (Instr. 5)	

Explanation of Responses:

## Remarks:

Reporting Person is the President and sole director of Saddle Ranch Productions, Inc.  $\,$ 

/s/ Kimberly Sarubbi 07/31/2009

\*\* Signature of Reporting Person Date

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$ 

- $^{\star}$  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.

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 Number.