### REGER MICHAEL LEWIS

Form 5

February 14, 2012

#### **OMB APPROVAL** FORM 5 **OMB**

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

Reported Form 4

1(b).

Transactions Reported

| REGER MICHAEL LEWIS Syr              |                                      |  | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>NORTHERN OIL & GAS, INC. [N<br>O G] |             |           | I                       | 5. Relationship of Reporting Person(s) to<br>Issuer  (Check all applicable)              |  |                   |  |  |
|--------------------------------------|--------------------------------------|--|--|-------------|-----------|-------------------------|--|--|-------------------|--|--|
| (Last)                               | (First) (N                           | (Month   | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2011                      |             |           | _                       | _X Director<br>_X Officer (give<br>pelow)  | e title Other  | Owner or (specify |  |  |
| 315 MANI                             | ГОВА AVE, SUI                        | 2011   |  |             |           |                         | C. E. O.   |  |                   |  |  |
| (Street) 4. If An                    |                                      |  | Amendment, Date Original   |             |           |                         | 6. Individual or Joint/Group Reporting   |  |                   |  |  |
|                                      | Ionth/Day/Year)                      | nth/Day/Year)  |  |             |           | (check applicable line) |  |  |                   |  |  |
| (спеск аррпсаоте ппе)                |                                      |  |  |             |           |                         |  | ,  |                   |  |  |
| WAYZATA                              | A, MN 55391                          |  |  |             |           | _                       | X_ Form Filed by Form Filed by l Person  | One Reporting P<br>More than One R                                   |                   |  |  |
| (City)                               | (State)                              | (Zip) Ta   | ible I - Non-Dei   | ivative Sec | urities   | Acqui                   | ired, Disposed of  | f, or Beneficial   | lly Owned         |  |  |
| 1.Title of<br>Security<br>(Instr. 3) | ecurity (Month/Day/Year) Execution D |  | Code (D)   |             |           | of                      | 5. Amount of<br>Securities<br>Beneficially<br>Owned at end<br>of Issuer's<br>Fiscal Year | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) |                   |  |  |
|                                      |                                      |  |  | Amount      | or<br>(D) | Price                   | (Instr. 3 and 4)   |  |                   |  |  |
| Common<br>Stock                      | 09/21/2011                           | Â  | G  | 50,000      | D         | \$0                     | 2,917,412  | D  | Â                 |  |  |
| Common<br>Stock                      | 11/04/2011                           | Â  | G  | 6,500       | D         | \$ 0                    | 2,917,412  | D  | Â                 |  |  |
| Common<br>Stock                      | Â                                    | Â  | Â  | Â           | Â         | Â                       | 1,000  | I  | By Wife           |  |  |
| Reminder: Repsecurities bene         |                                      | Persons who respond to the collection of information contained in this form are not required to respond unless |  |             |           |                         | SEC 2270<br>(9-02)   |  |                   |  |  |

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# 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 | 2.          | 3. Transaction Date | 3A. Deemed         | 4.          | 5.         | 6. Date Exerc    | cisable and | 7. Titl | e and    | 8. Price of |
|-------------|-------------|---------------------|--------------------|-------------|------------|------------------|-------------|---------|----------|-------------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transaction | Number     | Expiration D     | ate         | Amou    | int of   | Derivative  |
| Security    | or Exercise |                     | any                | Code        | of         | (Month/Day/      | Year)       | Under   | lying    | Security    |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8)  | Derivative | e                |             | Securi  | ities    | (Instr. 5)  |
|             | Derivative  |                     |                    |             | Securities |                  |             | (Instr. | 3 and 4) |             |
|             | Security    |                     |                    |             | Acquired   |                  |             |         |          |             |
|             | ·           |                     |                    |             | (A) or     |                  |             |         |          |             |
|             |             |                     |                    |             | Disposed   |                  |             |         |          |             |
|             |             |                     |                    |             | of (D)     |                  |             |         |          |             |
|             |             |                     |                    |             | (Instr. 3, |                  |             |         |          |             |
|             |             |                     |                    |             | 4, and 5)  |                  |             |         |          |             |
|             |             |                     |                    |             |            |                  |             |         |          |             |
|             |             |                     |                    |             |            |                  |             |         | Amount   |             |
|             |             |                     |                    |             |            | Date             | Expiration  | m: 1    | or       |             |
|             |             |                     |                    |             |            | Exercisable Date | *           | Title   | Number   |             |
|             |             |                     |                    |             |            |                  |             |         | of       |             |
|             |             |                     |                    |             | (A) (D)    |                  |             |         | Shares   |             |

## **Reporting Owners**

| Reporting Owner Name / Address  | Relationships |           |          |       |  |  |  |
|---|---------------|-----------|----------|-------|--|--|--|
|   | Director      | 10% Owner | Officer  | Other |  |  |  |
| REGER MICHAEL LEWIS<br>315 MANITOBA AVE, SUITE 200<br>WAYZATA Â MNÂ 55391 | ÂX            | Â         | C. E. O. | Â     |  |  |  |

## **Signatures**

/s/ Michael L.
Reger

\*\*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 provided 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.

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