

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

#### OMB APPROVAL OMB 3235-Number: 0104 Estimated average burden hours per response... 0.5

### INITIAL STATEMENT OF 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 Type Responses)        |  |                         |   |  |  |  |  |  |
|----------------------------------|--|-------------------------|---|--|--|--|--|--|
| 1. Name and Address of Reporting | 2. Date of Event Req                                   | uiring 3. Issuer Nan    | g 3. Issuer Name and Ticker or Trading Symbol |  |  |  |  |  |
| Person <sup>*</sup>              | Statement  | TELLURIA                | AN INC. /DE                                   | [/ [TELL]  |  |  |  |  |
| Souki Family 2016 Trust          | (Month/Day/Year)                                       |                         |   |  |  |  |  |  |
| (Last) (First) (Middle)          | 02/10/2017   | 4. Relationsh           | ip of Reporting                               | 5. If Amendment, Dat   | te Original                                |  |  |  |
| 1201 LOUISIANA STREET,           |  | Person(s) to I          | · · ·   | Filed(Month/Day/Year)  | 0  |  |  |  |
| SUITE 3100                       |  |                         | all applicable                                |  |  |  |  |  |
| (Street)                         |  | Director<br>Officer (gi |   | specify 6. Individual or Joint/  | <sub>fy</sub> 6. Individual or Joint/Group |  |  |  |
| HOUSTON, TX 77002                |  | title below)            | below)  | Filing(Check Applicable L<br>_X_ Form filed by One Repc<br>Form filed by More than<br>Person | orting Person                              |  |  |  |
| (City) (State) (Zip)             | Table I - Non-Derivative Securities Beneficially Owned |                         |   |  |  |  |  |  |
| 1.Title of Security              | 2. Am  | ount of Securities      | 3.  | 4. Nature of Indirect Benefic  | ial  |  |  |  |
| (Instr. 4)                       | Benefi   | cially Owned            | Ownership                                     | Ownership  |  |  |  |  |
|                                  | (Instr.  | 4)                      | Form: Direct                                  | (Instr. 5)   |  |  |  |  |
|                                  |  |                         | (D) or  |  |  |  |  |  |
|                                  |  |                         | Indirect (I)                                  |  |  |  |  |  |
|                                  |  |                         | (Instr. 5)                                    |  |  |  |  |  |
| Common Stock                     | 26,00  | 0,000                   | 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. SEC 1473 (7-02)

#### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1        |
|----------|
| ndirect  |
| vnership |
|          |
|          |
|          |
|          |
|          |
|          |
|          |
|          |

### **Reporting Owners**

| Reporting Owner Name / Address  |  | Relationships |         |       |  |  |
|---|--|---------------|---------|-------|--|--|
|   |  | 10% Owner     | Officer | Other |  |  |
| Souki Family 2016 Trust<br>1201 LOUISIANA STREET, SUITE 3100<br>HOUSTON, TX 77002 |  | Х             |         |       |  |  |

## Signatures

/s/ Daniel Belhumeur under Power of Attorney by Charif Souki, Trustee of the Souki Family 2016 Trust

03/20/2017

----Signature of Reporting Person

Date

# **Explanation of Responses:**

- \* 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.

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.