FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
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## 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

1. Name and A	Address of Rep	2. Date of E Requiring S (Month/Day	tatement	3. Issuer Name and Ticker or Trading Symbol ROC Energy Acquisition Corp. [ DTI ]								
(Last) 2591 LAKI 100	(First) ESIDE PARI	(Middle) KWAY, SUITE	06/20/202	3	4. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner Officer (give title below) Other (specify below)				5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) FLOWER MOUND (City)	TX (State)	75022 (Zip)								eck Applicable Form filed I Person	by One Reporting	
Table I - Non-Derivative Securities Beneficially Owned												
, , ,					Benefic	unt of Securities cially Owned (Instr.			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Sounderlying Derivative Sounders (Instr. 4)				cise Form:		6. Nature of Indirect Beneficial Ownership (Instr.	
				Expiration Date	Title		Amount or Number of Shares	Derivative Security		or Indirect (I) (Instr. 5)	5)	

**Explanation of Responses:** 

## Remarks:

No securities are beneficially owned.

/s/ John D. Furst

06/22/2023

\*\* Signature of Reporting

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.