FORM 4

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

OMB APPROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN 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 Ty | pe Response | s) | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|--|-------------------|---|-----------------------|--|---------------|--|---|---|---|---|----------------------------------|--|---|----------------------------------|
| 1. Name and Address of Reporting Person * HARDING MARK W | | | | 2. Issuer Name and Ticker or Trading Symbol PURE CYCLE CORP [pcyo] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | |
| (Last) (First) (Middle) 8451 DELAWARE STREET | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/24/2007 | | | | | | | X Officer (give title below) Other (specify below) President and CFO | | | | | | | |
| (Street) | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | |
| | ΓΟN, CO | | | | | | | | | | | | | | | | | |
| (City |) | (State) | (Zip) | | | Ta | ble I | - Non | -Deri | vative | Securities A | Acqui | red, Dispo | osed of, or I | Beneficially | Owned | | |
| 1.Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date any | | | if Code (Instr. 8) | | | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | | | ollowing | Ownership Form: | | 7. Nature of Indirect Beneficial |
| | | | (Month/Day/Year) | | | ode | V | Amoui | (A) or | Price | (Instr. 3 a | nstr. 3 and 4) | | Direct (D) or Indirec (I) (Instr. 4) | (Instr. 4) | | | |
| Common | Stock | | 07/24/2007 | | | | | S | | 50,00 | 9 | | 517,243 | | | D | | |
| | | | | | | | | 1 quire | the fo | orm dis | splays a c | urrei eficial | ntly valid | | spond unle trol numbe | | | |
| 1 Title of | 2 | 2 T | | - | outs, calls 4. | | | | | | tible secur | | 41 | 0 D.: f | 0. M | of 10. | 1 | 11. Nature |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transactior Date (Month/Day/\) | Execution Da Year) any | te, if Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | Amo Und Secu | itle and bunt of erlying irities r. 3 and | Derivative Security (Instr. 5) | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Owner Form of Deriva Securi Direct or Indi | of tive ty: (D) rect | of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | V | (A) | | Date Exerc | cisable | Expiration Date | Title | Amount or Number of Shares | | | | | |

Reporting Owners

| | Relationships | | | | | | | |
|--|---------------|--------------|-------------------|-------|--|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | |
| HARDING MARK W 8451 DELAWARE STREET THORNTON, CO 80260 | X | | President and CFO | | | | | |

Signatures

| Mark W. Harding | 07/26/2007 | | | |
|---------------------------------|------------|--|--|--|
| **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.