FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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 | | | | | | | | | | | | | | | | | |
|---|---|--|--------------------|--|---|----------|---------|---|---|----------------------------|---|---|---|--|--------------------|---|---|
| 1. Name and Address of Reporting Person* MIDDLEMAS GEORGE M | | | | 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) 225 W WASHINGTON SUITE 1500 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/25/2007 | | | | | | - | Office | r (give title belo | ow) | Other (specify | below) | |
| (Street) CHICAGO, IL 60606 | | | | 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 | | | | | | |
| (City) (State) (Zip) | | | | Table I - Non-Derivative Securities Acqu | | | | | | Acquii | ired, Disposed of, or Beneficially Owned | | | | | | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | | | f Code (Instr. 8) | | ction | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | | Beneficially Owned Following Reported Transaction(s) | | | Ownership of Form: | Beneficial | |
| | | | | (Month/Day/Year) | | | ode | v | Amoui | C | A) or O) I | Price | (Instr. 3 and 4) | | | Direct (D) or Indirect (I) (Instr. 4) | Ownership (Instr. 4) |
| Common | Common Stock | | | | | | | | | | | 20,000 | | | D | | |
| Common Stock 07/24 | | 07/24/2007 | | | | S | | 677,23 | 39 D | \$ | § 7.75 | 0 | | | I | See ftn. | |
| | | | Table II - | | | | cquire | con the | tained i form dis | n this splays of, or | forns a c | n are urren ficiall | not requ itly valid | ction of inf uired to res OMB conf | spond unle | ss | 1474 (9-02) |
| 1. Title of | 2 | 3. Transactio | | (e.g., puts) | , calls, v | 5. | ıts, op | | s, conver Oate Exer | | | · - | tle and | 8 Price of | 9. Number | of 10. | 11. Natur |
| Derivative Security | Conversion or Exercise Price of Derivative Security | | Year) Execution Da | rte, if Transaction Code Year) (Instr. 8) | | Number a | | and (Mo | and Expiration Date (Month/Day/Year) S (| | | Amo Unde Secur | unt of erlying rities r. 3 and | Derivative Security (Instr. 5) | | Owners Form of Derivat Securit Direct of Or India | hip of Indire Beneficia Ownersh (Instr. 4) D) ect |
| | | | | С | ode V | (A) | (D) | Date Exe | - | Expira Date | ation | Title | Amount or Number of Shares | | | | |

Reporting Owners

| | Relationships | | | | | |
|--|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| MIDDLEMAS GEORGE M 225 W WASHINGTON SUITE 1500 CHICAGO, IL 60606 | X | | | | | |

Signatures

| /s/ George Middlemas | 07/31/2007 | | | |
|---------------------------------|------------|--|--|--|
| **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).
- (1) These securities were owned by Apex Investment Fund II L.P. ("Apex II"). The Reporting Person is a general partner of the sole general partner of Apex II. The Reporting Person disclaims beneficial ownership of all securities owned by Apex II except to the extent of his proportionate pecuniary interests therein.

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.