FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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	OMB Number:	3235-0287
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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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Date (Month/Day/Year) Execution Date, frany (Month/Day/Year) Fany (Month/Day/Year) Part (Month				2. Issuer Name and Ticker or Trading Symbol MURPHY OIL CORP /DE [MUR]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
A	200 PEACH STREET					st Tran	saction	(Mont	th/Day/Year)	Officer (give title Other (specify										
College	P.O. BOX 7000			. 4. 1	If Ame	ndment,	, Date	of Origi	nal Fil	ed (Month/Da	y/Year)				oint/Gro	up Filing	(Check A	pplicable		
Clip (State Cip Cip Clip Cip			7000											X Form filed by One Reporting Person Form filed by More than One Reporting						
2. Transaction Date	(City)	(5	State)	(Zip)												. 0.00				
Date Month/Day/Year Faceution Date, Fac			Tal	ole I - N			1		es Ac		ed, D				cially					
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Amount (Instr. 4) or Number of					C	Code	v	(A) (I	D)		cisable		Title	or Nu of	mber					
		\$25.1084	11/12/2013			M		4	,649 ⁽¹⁾	02/03	3/2005	02/03/2014			649	\$0	()	D	

- 1. Original award of 4,200 stock options was adjusted by a ratio of 1.1070 on September 6, 2013 as a result of the spin-off of Murphy USA Inc.
- 2. Non-Employee Director stock option granted under the Non-Employee Director Stock Plan approved on May 14, 2003.

/s/ E. Ted Botner, attorney-in-11/13/2013 **fact**

Date

** Signature of Reporting Person Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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.

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.