## FORM 5

Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	205/10
wasiiiigton,	D.C.	20549

	OMB APPI	OMB APPROVAL							
	OMB Number:	3235-0362							
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hours per response:

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Form 3 Holdings Reported.

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP** 

Form 4	Transactions I	Reported.		or Section 30	ii) oi tile ilivesi	anchi Company Ac	JI UI 194	U				
Name and Address of Reporting Person*     HAMMOCK KELLI M				2. Issuer Name <b>and</b> Ticker or Trading Symbol MURPHY OIL CORP /DE [ MUR ]					Check all app Direc	licable) tor		% Owner
(Last) 200 PEA	CH STREE	,	Middle)	3. Statement for 12/31/2011	Year)	- X Officer (give title Other (specify below)  Vice President						
(Street) EL DORA (City)			1731-7000 Zip)	4. If Amendme	nt, Date of Oriç	ginal Filed (Month/L		Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)		1					6. Ownership Form: Direct			
1. Title of Se	curity (instr	3)	Date	Execution Date, if any	Transaction Code (Instr.	4. Securities Acqu Of (D) (Instr. 3, 4 a		or Disposed	Securition Benefici	es ally	Ownership Form: Direct	7. Nature of Indirect Beneficial
I. Title of Se	curty (instr	s)	Date	Execution Date,	Transaction Code (Instr.	Of (D) (Instr. 3, 4		or Disposed	Securition Beneficit Owned a Issuer's	es ally at end of	Ownership	Indirect
Common			Date	Execution Date, if any	Transaction Code (Instr.	Of (D) (Instr. 3, 4	(A) or		Securitic Benefici Owned a Issuer's Year (Ins 4)	es ally at end of Fiscal	Ownership Form: Direct (D) or Indirect (I)	Indirect Beneficial Ownership
	Stock		Date (Month/Day/Year)	Execution Date, if any	Transaction Code (Instr. 8)	Of (D) (Instr. 3, 4 a	(A) or (D)	Price	Securitic Benefici Owned a Issuer's Year (In: 4)	es ally at end of Fiscal str. 3 and	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial Ownership (Instr. 4)
Common	Stock Stock	5)	Date (Month/Day/Year) 12/31/2011	Execution Date, if any	Transaction Code (Instr. 8)	Amount	(A) or (D)	Price \$0	Securitie Benefici Owned a Issuer's Year (Ins 4)	es ally tend of Fiscal str. 3 and	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial Ownership (Instr. 4)  By Spouse  Trustee Of Company
Common Common	Stock Stock	,	Date (Month/Day/Year)  12/31/2011  12/31/2011  ble II - Derivat	Execution Date, if any (Month/Day/Year	Transaction Code (Instr. 8)  J(1)  J(2)  S Acquired	Amount 4	(A) or (D)  A  A	\$0 \$0	Securitie Beneficio Owned a Issuer's Year (Ins 4)	es ally the the dot of Fiscal str. 3 and 80	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial Ownership (Instr. 4)  By Spouse  Trustee Of Company

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

## **Explanation of Responses:**

- 1. Shares obtained through IRA.
- 2. Shares obtained through Company Thrift Plan.

/s/ John A. Moore, attorney-in-

01/31/2012

fact

\*\* Signature of Reporting Person

Date

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.