FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OWNERSHIP

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

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OMB APPR	OVAL					
OMB Number:	3235-0362					
Estimated average burden						
hours per response:	1.0					

Form 3 Holdings Reported.

Instruction 1(b)

File															
1. Name and Address of Reporting Person* DEMING CLAIBORNE P			2. Issuer Name and Ticker or Trading Symbol MURPHY OIL CORP /DE [MUR]				5. Relationship of Repo (Check all applicable) X Director			0 ()		S Owner			
Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2014						Officer (give title Other (specify below) below)								
P.O. BOX 7000				If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable					
(Street) EL DORADO AR 71731-7000										X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Zip)															
e I - Non-Deriv	ative Sec	uriti	es Ac	quire	ed, Di	sposed	of, or	Benefic	ciall	y Owne	ed				
2. Transaction Date (Month/Day/Year)				n Of (D) (Instr. 3, 4 and 5)			Securities Beneficially			6. Ownership Form: Direct	rship Direct	7. Nature of Indirect Beneficial			
			8)		Amoun	ıt	(A) or (D) Price		Issuer's Fisc		Fiscal	al Îndirect (I)		Ownership (Instr. 4)	
12/11/2014	1/2014		G		2	72	A	A \$0		782	782,789		D		
12/11/2014			G		272		A	\$0	\$0 47		,422 I		I	By Spouse	
							1,639,538				Beneficiary Of Trusts				
										209,720		I I		Self, Trustee For My Children	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)															
3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of Deri Secu Acqu (A) c Disp of (D (Inst and	vative urities uired or osed)) r. 3, 4	Expir (Mon	ation Date th/Day/Year) Expiration		Amount of Securities Underlying Derivative Security (Instr. and 4) Amount of Security (Instr. and 4)		3 Signature of the state of the	Derivative Security (Instr. 5) derivativ Securitie Benefici Owned Followin Reporte Transaci		e s ally g	Form: Direct (D) or Indirect	Beneficial Ownership t (Instr. 4)	
	Middle) 21731-7000 2ip) e I - Non-Deriv 2. Transaction Date (Month/Day/Year) 12/11/2014 12/11/2014 12/11/2014 ble II - Derivat (e.g., pt	Middle) 2. Issuer Noun MURP 3. Statemed 12/31/20 4. If Amen 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (e.g., puts, calls, and code (Instr.)	viiddle) 2. Issuer Name MURPHY 3. Statement for 12/31/2014 4. If Amendmen 2. Transaction Date (Month/Day/Year) 2. Transaction Date, if any (Month/Day/Year) ble II - Derivative Securities (e.g., puts, calls, warr (Month/Day/Year) 3A. Deemed Execution Date, if any (Month/Day/Year)	Middle) 2. Issuer Name and Tic MURPHY OIL of MURPHY OIL o	Available of Code (Instr. 8) To section 30(h) of the invest and Ticker or MURPHY OIL COF 3. Statement for Issuer's Fiscal 12/31/2014 4. If Amendment, Date of Original Part of Code (Instr. 8) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. 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Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 4. If Amendment, Date of Original Filed (Month/Day/Year) 2. Transaction Date, if any (Month/Day/Year) 5. Number of Code (Instr. 8) 4. Securities Acquired (A) or (D)	MURPHY OIL CORP /DE [MUR] 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2014 4. If Amendment, Date of Original Filed (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Execution Date, (Month/Day/Year) 2. Transaction Code (Instr. (Month/Day/Year) 3. Transaction Code (Instr. (Month/Day/Year) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 4. Securities Acquired, Disposed Of (D) (Instr. 3, 4 and 5) 5. Number of Code (Instr. (Month/Day/Year) (Month/Day/Year) 3. Transaction Code (Instr. (A) or Disposed Of (D) (Instr. 3, 4 and 5) 6. 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If Amendment, Date of Original Filed (Month/Day/Year) 5. Insuaction Date (Month/Day/Year) 5. Insuaction Code (Instr. Month/Day/Year) 6. In Line 12/11/2014 G. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Code (Instr. Month/Day/Year) 6. Date Month/Day/Year) 7. Title and Execution Date, If any (Month/Day/Year) 7. Title and Execution Date, Ode (Instr. 8) 7. Title and Execution Date, Ode (Instr. 3) 7. Title and Execution Date, Ode (Instr. 8) 7. Title and Exe	2. Issuer Name and Ticker or Trading Symbol MURPHY OIL CORP /DE [MUR] S. Relationship (Check all app X Direct Office Delow 12/31/2014 S. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) S. Individual of Line) S. Form Pers S. Police of Office Delow 12/31/2014 S. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) S. Individual of Line) X. Form Pers S. Price of Office Delow 12/31/2014 S. Amount (A) or Disposed Office (Instruction Date, If any (Month/Day/Year) S. Amount (A) or Disposed Office (Instruction Date, If Amount (A) or Office Delow 12/2/11/2014 G. Amount (A) or Office Delow 12/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/	Company Act of 1940	2. Issuer Name and Ticker or Trading Symbol MURPHY OIL CORP /DE [MUR] S. Relationship of Reporting Per (Check all applicable) X. Director Officer (give title below) Director Officer (give title below) S. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) S. Torm filed by More the person S. Amount of Securities S. Acquired, Disposed of, or Beneficially Owned Securities S. Acquired, Disposed of, or Beneficially Owned Securities S. Amount of Securities Secu	Classer Name and Ticker or Trading Symbol MURPHY OIL CORP /DE MUR S. Relationship of Reporting Person(s) to Check all applicable) Y. Director 10% Officer (give title Other	

Explanation of Responses:

/s/ E. Ted Botner, attorney-in-

<u>fact</u>

** Signature of Reporting Person

Date

01/29/2015

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.