FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
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0.5

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

							. ,													
1. Name and Address of Reporting Person*  COSSE STEVEN A					2. Issuer Name <b>and</b> Ticker or Trading Symbol  MURPHY OIL CORP /DE [ MUR ]										Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
	CH STREI	•	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/01/2017											Officer (give title below)		Other ( below)	specify
P.O. BOX 7000						f Ame	ndment,	Date	of Origi	nal Fil	ed (Mor	nth/Da		6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) EL DOR	ADO A	R	71731-70	00									X Form filed by One Reporting Person  Form filed by More than One Repo							
(City)	(S	tate)	(Zip)																	
		Tab	le I - Noi	n-Deriv	ative	Sec	curitie	s Ac	quire	d, Di	ispos	ed o	f, or Be	enefic	ially	Owned	k			
			Date	2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)			Transaction Dispos			red (A) o str. 3, 4 a	and Securiti Benefic Owned		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
						e V	Amo	ount	(A) o (D)	r Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
Common Stock																94,	,422		D	
Common Stock															24,116(1)		I ,		Held in Company Fhrift Plan	
		7	able II -										or Ben ble sec			Owned			•	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Da	Date,	4. Transa Code (1 8)		of		6. Date Expirat (Month	ion Da		nd	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		S (I	. Price of perivative security nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expirat Date	tion	Title	Amou or Numb of Shares	er					
Restricted Stock Unit <sup>(2)</sup>	(3)	02/01/2017			A		6,935		(3)(	1)	(3)(4	1)	Common Stock	6,93	5	\$0	22,446	6	D	
Phantom Stock Unit	(5)								(6)		(6)		Common	5910	7)		591 <sup>(7)</sup>	)	D	

## **Explanation of Responses:**

- 1. Includes 398 shares obtained through the Company Thrift Plan. The information in this report is based on a plan statement dated December 31, 2016.
- 2. Award granted under the 2013 Stock Plan for Non-Employee Directors.
- 3. These Securities generally do not carry a Conversion Price, Exercisable Date, or Expiration Date.
- 4. Vest date is February 1, 2020.
- 5. Each phantom stock unit is the economic equivalent of one (1) share of Murphy Oil Corporation common stock.
- 6. The reported phantom stock units were acquired under Murphy Oil Corporation's excess benefit plan and are to be settled in cash upon the reporting person's retirement or other termination of service. The reporting person may transfer the value of his phantom stock units into an alternative investment account at any time prior to settlement.
- 7. Includes 10 shares obtained under the Murphy Oil Corporation's excess benefit plan. The information in this report is based on a plan statement dated December 31, 2016.

/s/ E. Ted Botner, attorney-in-02/02/2017 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.