FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAI	OWNERSHIP

OMB APPROVAL

5. Relationship of Reporting Person(s) to Issuer

OMB Number: 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(h)

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

2. Issuer Name **and** Ticker or Trading Symbol

1. Name and Address of Reporting Person* <u>DEMING CLAIBORNE P</u>						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					
(Last) (First) (Middle) 200 PEACH STREET P.O. BOX 7000						Date of /02/20		est Trar	nsaction	n (Mor	nth/Day/Year)		X Officer (give title Other (specify below) President & CEO						
(Street)	ADO A	R	71731	-7000	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(City)	(S	tate)	(Zip)		-									Form filed by More than One Reporting Person					
		Tak	le I -	Non-Deri	vativ	e Sec	curit	ies A	cquir	ed, C	Disposed o	of, or B	eneficia	ally Owne	d				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Yea		Execution Dat		Date,	Transaction Disposed Of (E		Acquired (A) or (D) (Instr. 3, 4 and 5)		Beneficia Owned Fo	s lly	6. Owners Form: Dir (D) or Indi (I) (Instr. 4	Direct Ir ndirect B r. 4) C	. Nature of ndirect eneficial wnership			
							l	Code V		Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	on(s) nd 4)		"	(Instr. 4)		
Common	Stock			02/02/2	007				M		60,000	A	\$13.853	657,	631	Ι)		
Common	Stock			02/02/2	007				M		60,000	A	\$12.593	717,	631	I)		
Common	Stock			02/02/2	007				M		60,000	A	\$16.371	.9 777,	631	I)		
Common	Stock			02/02/2	007				M		60,000	A	\$15.112	25 837,	631	Ι			
Common	Stock			02/02/2007					S		139,724	D	\$51.382	.6 697,	907	I)		
Common	Stock													1,529,536]		Beneficiary f Trusts	
Common	Stock													43,8	888	1	[E	By Spouse	
Common	Common Stock												81,1	81,115.2		I I	amily imited artnership		
Common	Stock													50,793 I		í b	ndirectly y aughter		
Common Stock												287,	287,222		ı l	Felf, Frustee for ny hildren			
Common	Common Stock											52,8	52,816			Trustee, Company Thrift Plan			
		-	Table								sposed of,								
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security		on Date Ex se (Month/Day/Year) if a		eemed tion Date, n/Day/Year)		ansaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		vative irities iired ir osed) (Instr.	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security	(Instr. 5) Benefic Owned Follow Report	ive cities Ownersh Form: Direct (D or Indire (I) (Instr. ed ction(s)		Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amoun or Numbe of Shares	r					
Stock Option	\$12.5938	02/02/2007			M			60,000	02/04	4/1999	02/04/2007	Commo Stock		0 \$0		0	D		
Stock Option	\$13.8532	02/02/2007			M			60,000	02/04	4/1999	02/04/2007	Commo Stock		0 \$0		0	D		
Stock Option	\$15.1125	02/02/2007			M			60,000	02/04	4/2000	02/04/2007	Commo Stock	60,00	0 \$0		0	D		
Stock Option	\$16.3719	02/02/2007			M			60,000	02/04	4/2000	02/04/2007	Commo Stock		0 \$0		0	D		

Explanation of Responses:

Remarks:

/s/ Walter K. Compton, Attorney-in-Fact

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** Signature of Reporting Person

Date

02/06/2007

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.