FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Bernard A Patrick							2. Issuer Name and Ticker or Trading Symbol SUPERIOR ENERGY SERVICES INC [SPN]								(Check all applic Directo		,		/ner	
(Last) (First) (Middle) 1001 LOUISIANA STREET SUITE 2900					02	3. Date of Earliest Transaction (Month/Day/Year) 02/26/2015									Senior Executive Vice Pres.					
(Street) HOUSTON TX 77002 (City) (State) (Zip)					_	4. If Amendment, Date of Original Filed (Month/Day/Year)									Form fi	or Joint/Group Filing (Check Applicable rm filed by One Reporting Person rm filed by More than One Reporting rson				
		Tab	le I - N	on-Deri	vativ	e Sec	curit	ties Ac	auire	d. Di	sposed o	of. or Be	nefic	ially	Owned					
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/					nsaction 2A. Exe n/Day/Year) if ar			A. Deemed xecution Date,		ction Instr.	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			5. Amou Securitie Beneficie Owned F		nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3	ion(s)			(Instr. 4)	
Common Stock 02/26/20						15			A ⁽¹⁾		12,257	A	\$	0	109	9,691		D		
Common Stock 02/26/20					2015)15			M		37,500	A	\$17	⁷ .46	147,191			D		
Common Stock 02/26/20					2015	15			S		37,500	D \$22.0)88 ⁽²⁾	109,691		D			
			Table II								posed of, converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/I	n Date, Trans Code			of Deri Seci Acq (A) (Disp of (E	umber vative urities uired or oosed O) (Instr. and 5)	6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		D	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction (Instr. 4)	Own Forn Direc or In (I) (Ir	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amor or Numl of Share	oer						
Options (right to	\$17.46	02/26/2015		1				37,500	12/31/2	2005	06/24/2015	Common	37,5	00	\$0	0	0 D			

Explanation of Responses:

- 1. Represents the number of shares of common stock issuable with respect to the 2014 portion of the performance share awards originally granted to the Reporting Person on February 12, 2014. Effective February 26, 2015, the Compensation Committee of the Issuer's Board of Directors certified the level of 2014 free cash flow, the applicable performance metric, and these performance share awards converted to time-vested RSUs. These RSUs will vest and payout in 2016.
- 2. The price reported represents the weighted average price of the shares sold. Shares were sold at varying prices in the range of 22.00 22.19. The Reporting Person hereby undertakes, upon request of the Staff of the U.S. Securities and Exchange Commission, the issuer or a security holder of the issuer, to provide full information regarding the number of shares sold at each separate price.

/s/ William B. Masters, on behalf of A. Patrick Bernard, 02/27/2015

pursuant to a power of attorney

** 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.