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* HALL TERENCE E							2. Issuer Name and Ticker or Trading Symbol SUPERIOR ENERGY SERVICES INC [SPN]									of Reporting cable) or (give title	g Person(s) to Iss 10% O Other (s		wner	
(Last) (First) (Middle) 601 POYDRAS STREET SUITE 2400						3. Date of Earliest Transaction (Month/Day/Year) 05/06/2011									below)			below)`		
(Street) NEW ORLEANS LA 70130					_ 4. _	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)					<u> </u>															
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y				tion	2A. Deemed Execution Da			3. Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amou Securitie Benefici Owned F		int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price			orted saction(s) r. 3 and 4)			(Instr. 4)	
Common Stock 05/06/201					2011	11			M		61,141	Α	\$10.	66 120),779	D			
Common Stock 05/06/20					2011				S		61,141	D	\$35.67	55 ⁽¹⁾ 59		,638		D		
Common Stock 05/09/202				2011	11			M		62,559	A	\$10.	12.66		2,197		D			
Common Stock 05/09/201					2011	1			S		62,559	D	\$36.00	36 .0057 ⁽²⁾ 5		,638		D		
		-	Table								posed of, , convertil				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)		Transaction Code (Instr.		umber vative urities uired or oosed O) (Instr. and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		D S	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Ownership	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amou or Numb of Share	er						
Options (right to buy)	\$10.66	05/06/2011			M			61,141	12/31/	/2004	08/10/2014	Commo	ⁿ 61,14	41	\$0	352,55	9	D		
Options (right to	\$10.66	05/09/2011			M			62,559	12/31/	/2004	08/10/2014	Commo	62,55	59	\$ 0	290,00	0	D		

Explanation of Responses:

- 1. The price reported represents the weighted average price of the shares sold. Shares were sold at varying prices in the range of \$35.5-\$36.14. 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.
- 2. The price reported represents the weighted average price of the shares sold. Shares were sold at varying prices in the range of \$35.78-\$36.15. 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 Terence E. Hall

05/10/2011

** 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.