FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D.C. 20040 |  |
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OMB APPROVAL

| OMB Number:            | 3235-0287 |  |  |  |  |  |
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| Estimated average burd | len       |  |  |  |  |  |
| 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(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* <u>HALL TERENCE E</u> |   |  |  | <u>S</u>         | 2. Issuer Name and Ticker or Trading Symbol SUPERIOR ENERGY SERVICES INC [ SPN ] |  |                  |   |         |                      |   |                          | (Che                             | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) $\frac{X}{}  \text{Director} \qquad \qquad 10\% \text{ Owner}$ |   |   |  |   |
|--|---|--|--|------------------|--|--|------------------|---|---------|----------------------|---|--------------------------|----------------------------------|--|---|---|--|---|
| (Last)   |   | irst)                                      | (Middle)   | $-$   $^{\circ}$ | PIN J  |  |                  |   |         |                      |   |                          | X                                | Officer (  | give title  |   | Other (sp  | pecify                                    |
| 601 POYDRAS STREET SUITE 2400                                  |   |  |  |                  | 3. Date of Earliest Transaction (Month/Day/Year) 04/28/2010                      |  |                  |   |         |                      |   |                          | Execu                            | itive Cha  | nirmar  | of Board  |  |   |
| (Street) NEW ORLEAD  | NS L.   | A  | 70130  | 4                | 4. If Amendment, Date of Original Filed (Month/Day/Year)                         |  |                  |   |         | 6. Inc<br>Line)      | lividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person |                          |                                  |  |   |   |  |   |
| (City)   | (S  | tate)                                      | (Zip)  |                  |  |  |                  |   |         |                      |   |                          |                                  |  |   |   |  |   |
|  |   | Та   | ıble I - Non-D   | Derivati         | ive S  | ecuritie   | s Ac             | quired,   | Dis     | posed o              | f, or B   | ene                      | ficially                         | Owned  |   |   |  |   |
| Date   |   |  | t. Transaction<br>Date<br>Month/Day/Year)                  |                  | 2A. Deemed<br>Execution Date<br>if any<br>(Month/Day/Yea                         |  | Code (Instr.     |   |         |                      | (A) or<br>3, 4 and 5  | Beneficial<br>Owned Fo   | i<br>Ily                         | Form:  | Direct III<br>Indirect Estr. 4)   | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |   |
|  |   |  |  |                  |  |  |                  | Code V  |         | Amount               | ınt (A) or (D)  |                          | Price                            | Reported Transaction(s) (Instr. 3 and 4)   |   |   |  |   |
| Common Stock 04/2  |   |  |  | 04/28/20         | 8/2010   |  | A <sup>(1)</sup> |   | 117,693 |                      | A   | \$0                      | 326,502                          |  |   | D   |  |   |
|  |   |  | Table II - De  |                  |  |  |                  |   |         | osed of,<br>onvertil |   |                          |                                  | Owned  |   |   |  |   |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)            | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year | Code (Instr.     |  | 5. Number of<br>Derivative<br>Securities<br>Acquired (A)<br>or Disposed<br>of (D) (Instr.<br>3, 4 and 5) |                  | 6. Date Exercisable an<br>Expiration Date<br>(Month/Day/Year) |         |                      | 7. Title<br>of Secu<br>Underly<br>Derivat<br>(Instr. 3  | rities<br>ring<br>ive So | ecurity                          | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)  | 9. Number derivative Securitie Beneficia Owned Following Reported Transacti | e<br>s<br>ully  | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>ect (Instr. 4) |
|  |   |  |  | Code             | v  | (A)  |                  | Date<br>Exercisab   |         | Expiration<br>Date   | Title   | O<br>N                   | mount<br>r<br>lumber<br>f Shares |  | (Instr. 4)  | (0)   |  |   |
| Options<br>(right to<br>buy)                                   | \$25.49   | 04/28/2010                                 |  | A                |  | 577,478  |                  | 04/28/2011  | (2)     | 04/28/2020           | Commo<br>Stock  | n 5                      | 577,478                          | \$0  | 577,4   | 78  | D  |   |

## **Explanation of Responses:**

- 1. Represents a grant of restricted stock from the company.
- 2. The stock options are exercisable in 1/3 annual increments beginning the date indicated and ending on the second anniversary thereof.

/s/ William B. Masters on behalf 04/30/2010 of Terence E. Hall

\*\* 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.