FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPROVAL | | | | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | | | |
| | Estimated average burden | | | | | | | | | | | |
| Ш | houre por roeponeo: | 0.5 | | | | | | | | | | |

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

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] | | | | | | | | f Reporting able) r (give title | Person(s) to Issu 10% Ow Other (s below) | | ner | |
|---|---|--|---|--------|---|---|--|---------|---|-------------------|-----------------------------|---|--|--|---|---|--|--|--|
| (Last) (First) (Middle) 1105 PETERS ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/22/2007 | | | | | | | | Executive Vice President | | | | | |
| (Street) HARVE | HARVEY LA 70058 | | | | | 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 Form filed by More than One Reporting Person | | | | | |
| | | Tal | ole I - No | on-Der | rivativ | re Se | curi | ties Ac | quired | l, Di | sposed of | f, or Ber | neficiall | y Owned | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | | tion 2A. Deemed Execution Da | | | 3. Transa Code (8) | | 4. Securities Disposed O | | 5. Amount of | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of ndirect Beneficial Dwnership Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Transact (Instr. 3 | ion(s) | | | insu. 4) | |
| Common Stock 05/22/2 | | | | | | 2007 | | | М | | 15,000 | A | \$9.85 | 23, |)91 | | D | | |
| Common Stock 05/22/2 | | | | | | 2007 | | | М | | 10,000 | A | \$10.66 | 33, | ,091 | | D | | |
| Common Stock 05/22/2 | | | | | | 2007 | | | S | | 25,000 | D | \$41.163 | 8,091 | | | D | | |
| | | | Table II | | | | | | | | oosed of, convertib | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | n of | | 6. Date Exercis Expiration Date (Month/Day/Ye | | te | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | ıble | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| Options (right to buy) | \$9.85 | 05/22/2007 | | | M | | | 15,000 | 07/03/20 | 04 ⁽¹⁾ | 07/03/2013 | Common Stock | 15,000 | \$0 | 0 | | D | | |
| Options (right to | \$10.66 | 05/22/2007 | | | M | | | 10,000 | 12/31/2 | 004 | 08/10/2014 | Common Stock | 10,000 | \$0 | 90,000 | | D | | |

Explanation of Responses:

1. The stock options are exercisable in 1/3 increments beginning the date indicated and ending on the second anniversary thereof.

/s/ William B. Masters for A. Patrick Bernard

05/23/2007

** 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.