FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20349

OMB APPROVAL

OMB Number: 3235-0287
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(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

							. ,				<u> </u>								
1. Name and Address of Reporting Person* DAWKINS ENOCH L						2. Issuer Name and Ticker or Trading Symbol SUPERIOR ENERGY SERVICES INC [5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
						SPN]													
(Last) (First) (Middle)														Office	r (give title		Other (s	specify	
						3. Date of Earliest Transaction (Month/Day/Year) 05/22/2008								20.01.	,		20.011)		
1105 PETERS ROAD																			
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)					(Line)					
HARVEY LA 70058													X Form filed by One Reporting Person						
													Form filed by More than One Reporting						
(City) (State) (Zip)													Perso	n					
(Oity) (State) (ZIP)																			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of 9	Security (Inst	tr. 3)		2. Transa	action	7 2	2A. Deem	ed	3.		4. Secur	ities Acquir	ed (A) or	5. Amo	unt of	6. Ov	wnership	7. Nature	
Date					av/Va	Execution Date						d Of (D) (Instr. 3, 4 a		d Securities Beneficially		Form: Direct		of Indirect Beneficial	
				(Month/Day/Year)			(Month/Day/Yea							Following (l) (lı		nstr. 4)	Ownership		
										_	_	(A) o	r .	Report	ted action(s)		- 1	(Instr. 4)	
									Code	٧	Amount	(D)	' Price	(Instr. 3	and 4)				
Table II - Derivative Securities Acquired Disposed of or Repeticially Owned																			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
														8. Price of	0. No		10.	11. Nature	
1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D		4. Transactio Code (Inst 8)				Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying		Derivative	9. Number of derivative Securities Beneficially		Ownership Form: Direct (D) or Indirect		
Security (Instr. 3)	or Exercise Price of		if any (Month/Day											Security (Instr. 5)					
(IIISII. 3)	Derivative		(Worldin Dayriear)		0)		Acquired		Derivative				Security	(IIISII. 5)	Owned	٠ ا		(Instr. 4)	
	Security (A) o				(A) or Disposed (Instr. 3 and 4)							1	Following Reported		(I) (Instr. 4)				
						of (D)							Transacti		on(s)				
							(Instr. 3, 4 and 5)								(Instr. 4)				
							1					Amou		1					
													or						
									Date	Fx	piration		Number of						
					Code	٧	(A)	(D)	Exercisable	Da		Title	Shares						
Restricted										Г		Common							
Stock Units	(1)	05/22/2008			A		2,643		(2)		(2)	Stock	2,643	\$0	14,559)	D		

Explanation of Responses:

- 1. Each restricted stock unit represents a right to receive one share of the Issuer's common stock.
- 2. The restricted stock units vest immediately upon grant, but the shares of common stock payable upon vesting will not be delivered to the reporting person until he ceases to serve on the board of directors of the Issuer

William B. Masters on behalf of Enoch L. Dawkins

05/22/2008

** 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.