Edgar Filing: King Gary R - Form 4

| King Gary R | | | | | | | | | | |
|---|--------------------------------------|------------------------------|---|---|-------------|--|---|---|--------------|--|
| Form 4 | | | | | | | | | | |
| March 12, 20 | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | | | | OMB APPROVAL | |
| | UNITED | SIAIES | | hington, | | | COMINISSION | OMB Number: | 3235-0287 | |
| Check this if no longe | | | | | | Expires: | January 31, 2005 | | | |
| subject to | MENT O | F CHANGES IN BENEFICIAL OWNE | | | | NERSHIP OF | Estimated a | | | |
| Section 16 Form 4 or | | | SECUR | TTES | | | | burden hours per | | |
| Form 5 | | rsuant to S | Section 16 | 5(a) of the | Securiti | es Exchan | ge Act of 1934, | response 0.5 | | |
| obligation | ^s Section 17 | | | | | | of 1935 or Section | n | | |
| may contin See Instruc | nue. | | | • | . | Act of 19 | | | | |
| 1(b). | | | | | | | | | | |
| (Print or Type Ro | esponses) | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> King Gary R | | | 2. Issuer Name and Ticker or Trading Symbol PARKER DRILLING CO /DE/ [PKD] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| | | | | | | | | | | |
| 5 GREENWA | AY PLAZA, SU | JITE 100 | (Month/Da 03/08/20 | | | | Officer (give below) | e title Oth below) | er (specify | |
| (Street) | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| | | | | | | | | | | |
| (City) | (State) | (Zip) | Table | e I - Non-De | erivative S | ecurities Ac | quired, Disposed o | f, or Beneficia | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Da (Month/Day/Year |) Execution any | med on Date, if Day/Year) | 3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5) | | Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Code V | Amount | (A)or(D) Price | Reported Transaction(s) (Instr. 3 and 4) | | | |
| Common Stock | | | | | | | 40,352 | D | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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| 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. Transacti Code (Instr. 8) | 5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount Underlying Securitie (Instr. 3 and 4) | |
|---|---|---|---|---------------------------------------|--|--|--------------------|---|------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amou or Numb of Sha |
| Restricted Stock Units | \$ 0 | 03/08/2013 | | А | 21,505 (1) | 03/10/2014(2) | 03/10/2014 | Common Stock | 21,5 |

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

King Gary R 5 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046

Signatures

Gary R. King 03/12/2013

<u>**</u>Signature of Reporting Person Date

Explanation of Responses:

* 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).

(1) Each restricted stock unit represents a contingent right to receive one share of PKD common stock.

(2) 100% of these reported restricted stock units vest on March 10, 2014.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.