UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

| OMB APPROVAL | | | | | | |
|-------------------------|-----------|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | |
| stimated average burden | | | | | | |
| ours per respon | se 0.5 | | | | | |

longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| (Print or Ty | pe Response | es) | | | | | | | | | | | | | |
|---|--------------------|--|--|--|------------|-----------------|---|--|--------------------------|---|--|--|--|------------------------------|--------------------|
| 1. Name and Address of Reporting Person * POTTER RONALD C | | | | 2. Issuer Name and Ticker or Trading Symbol PARKER DRILLING CO /DE/ [PKD] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | |
| 1401 ENCLAVE PARKWAY, SUITE 600 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/07/2008 | | | | | | | X Officer (give title below) Other (specify below) VP/General Counsel/Corp Sec | | | | |
| (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 PersonForm filed by More than One Reporting Person | | | | | | | |
| HOUSTON, TX 77077 | | | | | | | | | | | | | | | |
| (City |) | (State) | (Zip) | 5 | Tab | ole I - Non | -Deri | ivative S | ecuritie | s Acqu | ired, Disp | osed of, or l | Beneficially | Owned | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date any (Month/Day/Ye | | (Instr. 8) | | (A) or I | Oisposed 6, 4 and 5 (A) or | of (D) | Beneficia | nt of Securit Ily Owned I Transaction nd 4) | Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership | |
| 401K Co | mmon Stoc | ck (1) | | | | | | | | | 2,602.44 | 1 | | I | 401(k) Plan |
| Common | Stock | | | | | | | | | | 1,000 | | | I | By son |
| Common | Stock | | | | | | | | | | 1,000 | | | I | By other son |
| Common | Common Stock 04/07 | | 04/07/2008 | F | | | 2,557 | D | \$ 7.145 | 105,489 | | | D | | |
| Reminder: indirectly. | Report on a | separate line f | or each class of secu | urities beneficial | lly o | | Pers | sons wh | n this f | orm ar | e not req | ection of in uired to re d OMB cor | spond un | less | EC 1474 (9- 02) |
| | | | | Derivative Secure.g., puts, calls, | | • | | • | | | • | I | | | |
| Security | Conversion | 3. Transactio Date (Month/Day/ | n 3A. Deemed Execution Da Year) any | te, if Transaction Code Year) (Instr. 8) | | 5. Number of | and Expiration Date (Month/Day/Year) | | 7. T Am Und Sec | Title and ount of derlying urities str. 3 and | | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | Owners Form o Derivat Securit Direct (or India | Ownership (Instr. 4) D) ect | |
| Renor | ting O | wners | | Code | V | (A) (D) | Dat Exe | e ercisable | Expirati Date | on Titl | Amount or e Number of Shares | | | | |
| | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | | | | | | | | |

| Post of the Common Name / Add one | Relationships | | | | | | | |
|---|---------------|-----------|-----------------------------|-------|--|--|--|--|
| Reporting Owner Name / Address | | 10% Owner | Officer | Other | | | | |
| POTTER RONALD C 1401 ENCLAVE PARKWAY, SUITE 600 HOUSTON, TX 77077 | | | VP/General Counsel/Corp Sec | | | | | |

Signatures

| Ronald C Potter | 04/09/2008 |
|---------------------------------|------------|
| **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) 401K shares owned as of April 7, 2008.

 $Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, {\it see}\ Instruction\ 6 for procedure.$

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.