

### UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

#### OMB APPROVAL OMB 3235-Number: 0104 Estimated average burden hours per 0.5 response...

### INITIAL STATEMENT OF 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

Staten	nent			3. Issuer Name and Ticker or Trading Symbol PARKER DRILLING CO /DE/ [PKD]				
03/16/2015		4. Rel Person		erson(s) to Issuer (Check all applicable)			5. If Amendment, Date 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	
Table I - Non-Derivative Securities Beneficially Owned								
	Ben	eficial		Form: (D) or Indire	rship O Direct (In	wnership	direct Beneficial	
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		Secui		Co	nversion Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
(Month/Day/Ye	ar)	(Instr	·	Pri	ce of	Derivative Security:	(IIIstr. 3)	
i h	Statem (Mont 03/16 ITE are for each class to respond to the responded to respond to the responded to responded	Statement (Month/Day/Year 03/16/2015  ITE  ip)  Tal  2. A Ben (Ins)  the for each class of securit the respond to the colled to respond unless the securities Beneficially O  2. Date Exercisable	Statement (Month/Day/Year) 03/16/2015  Table I  2. Amoun Beneficia (Instr. 4)  the for each class of securities bern to respond to the collection d to respond unless the for  Securities Beneficially Owned  2. Date Exercisable  3. Title	Statement (Month/Day/Year) 03/16/2015  4. Relationsh Person(s) to I (CheckXDirectorOfficer (gititle below)  2. Amount of Securities Beneficially Owned (Instr. 4)  Table I - Non-Derivati  2. Amount of Securities Beneficially Owned (Instr. 4)  The for each class of securities beneficially owned on respond to the collection of information d to respond unless the form displays a cut-  Securities Beneficially Owned (e.g., puts, calls,	Statement (Month/Day/Year) 03/16/2015  4. Relationship of Reperson(s) to Issuer (Check all app X_Director Officer (give title below)  2. Amount of Securities Beneficially Owned (Instr. 4)  3. Owned (Instr. 4)  6. Relationship of Reperson(s) to Issuer (Check all app X_Director Officer (give title below)  3. Owned (Instr. 4)  6. Relationship of Reperson(s) to Issuer (Check all app X_Director Officer (give title below)  6. Owned (Instr. 4)  7. Owned (Instr. 4)  8. Relationship of Reperson(s) to Issuer (Check all app X_Director Officer (give title below)  9. Owned (Instr. 4)  9. Owned (Instr. 4	Statement (Month/Day/Year) 03/16/2015  4. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X_Director Officer (give title below)  2. Amount of Securities Beneficially Owned (Instr. 4)  Table I - Non-Derivative Securities  3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)  The for each class of securities beneficially owned directly or indirect to respond to the collection of information contained in the dorespond unless the form displays a currently valid Collection  Securities Beneficially Owned (e.g., puts, calls, warrants, option  2. Date Exercisable  3. Title and Amount of  4.	Statement (Month/Day/Year) 03/16/2015  4. Relationship of Reporting Person(s) to Issuer (Check all applicable) XDirectorOfficer (give10% OwnerFormFormFormFormFormForm	

## Reporting Owners

Reporting Owner Name / Address	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
SELIM AMR 5 GREENWAY PLAZA, SUITE 100	X				
HOUSTON, TX 77046					

# **Signatures**

Amr Selim	03/16/2015
**Signature of Reporting Person	Date

# **Explanation of Responses:**

### No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(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.

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.