

1.) CORPORATION NAME:

MURPHY OIL USA, INC.

DUE DATE: **12/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1127770**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 200 PEACH

CITY/ST/ZIP: EL DORADO, AR 71730

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	R. A CLYDE	
TITLE:	PRESIDENT	
ADDRESS:	3314 PRINCETON AVE	
CITY/ST/ZIP/CO:	DALLAS, TX 75205	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	M CHENG	
TITLE:	VICE PRESIDENT	
ADDRESS:	2337 HINSON RD	
CITY/ST/ZIP/CO:	EL DORADO, AR 71730	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	J A GOODWIN	
TITLE:	VICE PRESIDENT	
ADDRESS:	504 E.14TH STREET	
CITY/ST/ZIP/CO:	EL DORADO, AR 71730	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	J C RUDOLFS	
TITLE:	VICE PRESIDENT	
ADDRESS:	6000 HOPKINS NECK RD	
CITY/ST/ZIP/CO:	EASTON, MD 21601	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	J A MOORE	
TITLE:	ASST SECRETARY	
ADDRESS:	2316 RIDGEWOOD	
CITY/ST/ZIP/CO:	EL DORADO, AR 71730	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	D R SMITH	
TITLE:	CONTROLLER	
ADDRESS:	305 SAINT ANNES CT.	
CITY/ST/ZIP/CO:	BOSSIER CITY, LA 71111	

NAME: M K WEST TITLE: CFO ADDRESS: 264 RAINWATER RD CITY/ST/ZIP/CO: EL DORADO, AR 71730	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: M K WEST TITLE: DIRECTOR ADDRESS: 264 RAINWATER RD CITY/ST/ZIP/CO: EL DORADO, AR 71730	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ D R SMITH	D R SMITH, CONTROLLER	12/19/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.