FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | | |
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0.5

hours per response:

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

| 1. Name and Address of Reporting Person* Parker Billy Zane | | | | 2. Issuer Name and Ticker or Trading Symbol Laredo Petroleum, Inc. [LPI] | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|---|---|--|--|--|---|---|---------------------------------|--|------------|---|---|---------------|---------|---|---|--|--|---|--|-----------|
| | | | | | cuc | / I Cu | <u> </u> | <u> </u> | | . 1 | | | | X | Direc | ctor | | 10% C | wner | |
| (Last) (First) (Middle) 15 W. SIXTH STREET, SUITE 900 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/13/2014 | | | | | | | | | | | Office | er (give title w) | | Other (spec below) | |
| 10 111 01 | | 21,00112000 | | | 4 If A | ۸mar | ndment | Data o | f Original | Lilod | (Month/Da | av/Ve | ar) | 16 | Indiv | idual o | r loint/Grour | Eiling (C | hock A | nnlicable |
| (Street) TULSA | OI | ζ 7 | 74119 | | 4. 11 / | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ine) | ividual or Joint/Group Filing (Check App Form filed by One Reporting Person Form filed by More than One Report | | | | n |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | Pers | on | | · | |
| | | Tabl | e I - Noi | n-Deriva | ative | Sec | uritie | s Acc | uired, | Dis | posed o | f, o | r Ben | efici | ally | Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | ay/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | ities Acquired (A) d Of (D) (Instr. 3, 4 | | | 4 and S | | 5. Amount of Securities Beneficially Owned Following Reported | | rship irect direct 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | Code | v | Amount | | (A) or (D) | Price | ; | Transaction(s) (Instr. 3 and 4) | | | | (msu. 4) | |
| Common Stock 11/13/ | | | | /2014 | | | A | | 880(1) | | A | \$17.04 | | 96,825 | | D | | | | |
| | | Та | able II - I (| | | | | | | | sed of, onvertib | | | | | vned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | ay/Year) { | ransaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | ative rities ired osed | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | | Amount of Securities Underlying Derivative Security (Instr. and 4) | | | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Own Forn Direc or In (I) (Ir | ership n: ct (D) direct nstr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

1. These restricted shares are granted under the Issuer's 2011 Omnibus Equity Incentive Plan in lieu of cash payments for director fees at the election of the director.

Remarks:

/s/ Kenneth E. Dornblaser, as attorney-in-fact for Billy Z. **Parker**

11/14/2014

** 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.