

SANDRIDGE ENERGY INC

Reported by **BENNETT JAMES DONALD**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 04/03/14 for the Period Ending 04/01/14

Address 123 ROBERT S. KERR AVENUE

OKLAHOMA CITY, OK 73102-6406

Telephone 405-429-5500

CIK 0001349436

Symbol SD

SIC Code 1311 - Crude Petroleum and Natural Gas

Industry Oil & Gas Operations

Sector Energy

Fiscal Year 12/31





Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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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

1. Name and Address of Reporting Person *														5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
Bennett Jam	es Dona	ld											W D.			100	^
(Last) (First) (Middle)				í	3. Date of Earliest Transaction (MM/DD/YYYY)									X Director 10% Own			
123 ROBERT S. KERR AVENUE					4/1/2014								X Officer (give title below) Other (specify below) President and CEO				
(Street)				4	4. If Amendment, Date Original Filed (MM/DD/YYYY)								6. Individual or Joint/Group Filing (Check Applicable Line)				
OKLAHOM	A CITY	. OK	73102-										11				
6406														X _ Form filed by One Reporting Person _ Form filed by More than One Reporting Person			
(City)	(State)		(Zip)														
		Tal	ole I - Non	-Deri	ivativ	e Securi	ties Ac	qu	ired, D	isp	osed	of, or	Beneficially	y Owned			
1			2. T Date		2A. Deemed Execution Date, if any	Code (A) or Dis (Instr. 8) (Instr. 3, 4				sposed of (D) Own (Inst		mount of Securities Beneficially ned Following Reported Transaction(s) tr. 3 and 4)		Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						any	Code	v	Amount	or (D	í	ce				(I) (Instr. 4)	(msu. 4)
Common Stock				4/1/	1/1/2014		A		40517.0 (1)	A	\$6.15	18	1279666			D	
Common Stock													;	8835		I	by 401(k)
Ta	ble II - De	erivat	ive Securit	ties B	Benefi	icially O	wned (e.g	z., puts	, c	alls, v	varra	nts, options,	, convert	ible secur	ities)	,
(Instr. 3) or Exercise Date Execut			Deemed Execution Date, if	rans. ode (nstr. 8)	Deriv Secur Acqu Dispo	umber of vative rities hired (A) or osed of (D)	6. Date Exercisable and Expiration Date				7. Title and Amor Securities Underl Derivative Securi (Instr. 3 and 4)		rlying	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	Derivative Security: Direct (D) or Indirect (I) (Instr.	Beneficial
				Code V	/ (A)	(D)	Date Expiration Date			n 7		mount o	r Number of		Transaction (s) (Instr. 4)	4)	

Explanation of Responses:

(1) Reflects Company matching credit to the deferred compensation account of the reporting person under the SandRidge Energy, Inc. Nonqualified Excess Plan (the "NQ Plan") based on the reporting person's deferrals for the 1st quarter of 2014. Under the NQ Plan, these credits are deemed to be invested solely in shares of the Company's common stock and will be distributed in shares of the Company's common stock. However, until they are distributed from the NQ Plan, any shares set aside in a trust or otherwise to reflect these credits remain registered in the Company's name and are available to Company's creditors.

Reporting Owners

Paparting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Bennett James Donald								
123 ROBERT S. KERR AVENUE	X		President and CEO					
OKLAHOMA CITY, OK 73102-6406								

Signatures

By: Gaye A. Wilkerson, Power of Attorney

4/3/2014

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 control number.