FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPR | OVAL | | | | | |
|--------------------------|-----------|--|--|--|--|--|
| OMB Number: | 3235-0104 | | | | | |
| Estimated average burden | | | | | | |
| hours per response: | 0.5 | | | | | |

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

| 1. Name and Address of Reporting Person* 2. Date of Ev Pequiring Sta (Month/Day/ | | | | ment | 3. Issuer Name and Ticker or Trading Symbol UNIT CORP [UNT] | | | | | |
|---|--|------------|---|--|---|------------------------------------|--|---|--|--|
| (Last) (First) (Mddle) 8200 SOUTH UNIT DRIVE (Street) TULSA OK 74132 (City) (State) (Zip) | | 08/28/2017 | ΄ [. | Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify below) Sr VP Business Development | | ner pecify | If Amendment, Date of Original Filed (Month/Day/Year) Individual or Joint/Group Filing (Check Applicable Line) X Formfiled by One Reporting Person Formfiled by More than One Reporting Person | | | |
| | | | Table I - Non- | -Derivativ | ve Securities Benefici | ally Own | e d | | | |
| 1. Title of Security (Instr. 4) | | | 1 | . Amount of Securities eneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |
| Common Stock | | | | | 24,583 | D | | | | |
| Common Stock | | | | | 4,979(1) | I | | By 401(k) | | |
| | | (е | | | Securities Beneficial its, options, convertib | | | | | |
| 1. Title of Derivative Security (Instr. 4) 2. Date Exercisal Expiration Date (Month/Day/Year | | ate | 3. Title and Amount of Sec Underlying Derivative Sec (Instr. 4) | urity Conve | | rcise Form: | | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| | | | Date Exercisable | Amount or Number of | | Price of Derivative Security | | Direct (D) or Indirect (I) (Instr. 5) | | |

Explanation of Responses:

 $1. \ Based \ on \ a \ plan \ statement \ dated \ as \ of \ August \ 30, \ 2017.$

By April Adler under POA 08

<u>08/31/2017</u>

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).