FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL					
OMB Number:	3235-0	287			
Estimated average burden					
nours per response					

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

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

(Print or Ty	pe Response	es)		1							1				
1. Name and Address of Reporting Person * WEST J ROBINSON				2. Issuer Name and Ticker or Trading Symbol MAGELLAN PETROLEUM CORP /DE/ [MPET]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director Officer (give title below) Other (specify below)					
(Last) (First) (Middle) 1524 28TH ST NW				3. Date of Earliest Transaction (Month/Day/Year) 08/02/2016											
(Street) WASHINGTON, DC 20007			4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Form fil	6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Di						uired, Disp	oosed of, or Beneficially Owned				
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, it any (Month/Day/Year	(Instr. 8) Disposed of			ed (A) o	5. Amount of Securities A) or Beneficially Owned Follo Reported Transaction(s)			ollowing	Form: Direct (D)	7. Nature of Indirect Beneficial Ownership			
				Cod	de	V	Amoun	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock		08/02/2016		A			10,174 (1)	4 A	\$ 3.44 (2)	46,261			D	
Common	Stock		08/02/2016		A			29,661 (1)	1 A	\$ 1.18 (3)				D	
Reminder: indirectly.	Report on a	separate line f	or each class of secu	rities beneficially o	owned d	F	Perso	ons wh				ection of ir			EEC 1474 (9-
				Derivative Securiti	-	t	he fo	orm dis	splays of, or Bo	a cur	rently vali	juired to re d OMB cor			02)
Security	Conversion	3. Transactio Date (Month/Day/	Execution Da Year) any	te, if Transaction Code Year) (Instr. 8)	5. Num of Derivat Securiti Acquire (A) or Dispose of (D) (Instr. 3 4, and 5	tive ies ed ed	r 6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Article (Month/Day/Year)		Title and mount of aderlying ecurities astr. 3 and		9. Number Derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owners Form o Derivat Securit Direct (or India	Ownershi y: (Instr. 4) (D)		
				Code V	(A) (I	D)	Date Exer	cisable	Expirati Date	ion Ti	Amount or the Number of Shares				

Reporting Owners

D (1 0 N // 11	Relationships					
Reporting Owner Name / Address	Director	tor 10% Owner Of		Officer Other		
WEST J ROBINSON						
1524 28TH ST NW	X					
WASHINGTON, DC 20007						

Signatures

/s/ J. Robinson West	08/09/2016
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).

- (1) Award of shares for annual Board fees pursuant to the issuer's compensation policy for non-employee directors, which provides that each non-employee director may receive an annual award of shares with a value equal to \$35,000, with the determination of the exact number of shares to be made on July 1st.
- (2) Per share price used by the issuer to determine the number of shares awarded, and based on the market closing price of the shares as of July 1, 2015
- (3) Per share price used by the issuer to determine the number of shares awarded, and based on the market closing price of the shares as of July 1, 2016.

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.