## FORM 4

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

OMB APPROVAL
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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 Type Responses)  1. Name and Address of Reporting Person * SCHEIRMAN W RUSSELL II			2. Issuer Name and Ticker or Trading Symbol VAALCO ENERGY INC /DE/ [VEIX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 4600 POST OAK PLACE, SUITE 309			3. Date of Earliest Transaction (Month/Day/Year) 11/11/2003				[	X_Officer (give title below) Other (specify below)  President and CFO					
(Street) HOUSTON 77027			4. If Amendment, Date Original Filed(Month/Day/Year)					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 Acqu				Acqui	nired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)	Da	te onth/Day/Year)	2A. Deemed Execution Date, if any	Code (Instr. 8)	ction	4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	ant of Securities ally Owned Following d Transaction(s)		6. Ownership Form:	Beneficial
			(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	iiiu 4)			Ownership (Instr. 4)
Common Stock	11	/11/2003		S		3,800	D S	\$1.19	120,694	1		D	
		ch class of secur	·		cont	ained ir	n this for	rm are	not requ		ormation spond unlestrol number	ss	1474 (9-02)
		0.0000000000000000000000000000000000000			cont	ained ir	n this for	rm are	not requ	ired to res	pond unles	ss	1474 (9-02)
1. Title of 2. Conversion	3. Transaction Date (Month/Day/Yea	Table II - 1	Year) (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D)	ed, Di tions,	ained ir form dis	of, or Bentible securitisable on Date	rm are currer reficiall rities) 7. Ti Amo Unde	not requ ntly valid	OMB cont	pond unles	f 10. Ownersi Form of Derivati Security Direct ( or Indire	11. Naturof Indire Benefici Owners! (Instr. 4)
1. Title of Derivative Security (Instr. 3)  1. Title of 2. Conversion of Exercise (Instr. 3)  2. Conversion of Exercise (Instr. 3)	3. Transaction Date	Table II - 1	(e.g., puts, calls, wa 4. te, if Transaction Code Year) (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed	ed, Di tions,	ained ir form dis isposed o , convert ate Exerc Expiratio	of, or Bentible securitisable on Date	rm are currer reficiall rities) 7. Ti Amo Unde Secu (Insti	not required to the and count of cerlying rities	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Owners: Form of Derivati Security Direct (i or Indirects)	11. Naturof Indire Benefici Owners! (Instr. 4)
1. Title of Derivative Security (Instr. 3)  1. Title of 2. Conversion of Exercise (Instr. 3)  2. Conversion of Exercise (Instr. 3)	3. Transaction Date	Table II - 1	(e.g., puts, calls, wa 4. te, if Transaction Code Year) (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	cont the f	ained ir form dis isposed of convert ate Exerc Expiration nth/Day/	of, or Bentible securitisable on Date	rm are currer reficiall rities) 7. Ti Amo Undo Secu (Instrument)	not required to the and count of cerlying rities	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Owners: Form of Derivati Security Direct (i or Indirects)	11. Naturof Indire Benefici Owners! (Instr. 4)

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SCHEIRMAN W RUSSELL II 4600 POST OAK PLACE SUITE 309 HOUSTON 77027			President and CFO			

## **Signatures**

W. Russell Scheirman	11/13/2003
**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).

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.