FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
| OMB Number: 3235-02 | | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

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

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 * SANTA RICHARD A (Last) (First) (Middle) C/O DYNAMIC MATERIALS CORPORATION 5405 SPINE ROAD (Street) | | | | | 3. Da 01/1 | Issuer Name and Ticker or Trading Symbol DYNAMIC MATERIALS CORP [BOOM] One of Earliest Transaction (Month/Day/Year) One of Earliest Transaction (Month/Day/Year) 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) Sr VP & CFO 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
|--|--|--|--|---------------|---------------------------------|---|---|--------|---|------|---|------|---|-------------|--|--|---------------|--|--|
| BOULDER | CO | | 301 | | _ | | | | | | | | | | | | | | |
| (City) | (State) | (Zi _l | ble I - Nor | n-Der | ivativ | e Se | curitie | s Acai | uired. | Disp | osed of. | or E | Benefic | ially Ow | ned | | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date | | | | | th/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a | | | | Securities Beneficially Following | Beneficially Owned Following Reported | | nership Direct (D) irect (I) 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) |
| Common Stock 01/19 | | | | | /19/2011 | | | | A | | 11,000(1) | | A | \$ 0 | 165,934 | | D | | |
| Common Stock 01/19 | | | | | /19/2011 | | | | A | | 3,000(2) | | A | \$0 | 168,934 | | D | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/N | ate, (ear) | 4. Transac Code (In 8) | | str. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | | e Securitie ear) Derivativ | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Shares | | 8. Price of Derivative Security (Instr. 5) (Instr. 5) Reported Transacti (Instr. 4) | | e s lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses

- 1. The shares vest in one-third increments on the first, second and third anniversary of the grant. The shares will vest immediately upon termination without cause, retirement or death or disability; however, the executive officer will forfeit such shares upon resignation or termination for cause.
- 2. The shares vest upon the earlier of the fifth anniversary of the grant date or the retirement of the executive officer.

Remarks:

/s/ Richard A. Santa

01/21/2011

** 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.