FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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).

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 at Jaramil (Last) 5959 SA	3. E 05/	Schlumberger Limited/NV [ SLB ]  3. Date of Earliest Transaction (Month/Day/Year)  05/16/2018  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) VP, Treasurer  6. Individual or Joint/Group Filing (Check Applicable							
(Street) HOUSTON TX 77056  (City) (State) (Zip)					-									Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transact Date (Month/Day)					ction	ion 2A. Deemed Execution Date,			3.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			5. Amount of		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock, \$0.01 Par Value Per Share 05/16/2								M	V	3,000	(A) or (D)	\$67.8	7 (Instr.	and 4) 162		D		
Common	Stock, \$0.0	)1 Par Value Per <b>7</b>			ative \$						3,000 posed of converti				,162		D	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)			4. Transaction Code (Instr. 8)		of		6. Date Exercis Expiration Dat (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership	Beneficial Ownership ct (Instr. 4)
					Code	ode V	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares					
Non- Qualified Stock Option (Right to	\$67.87	05/16/2018			М			3,000	10/22/20	014	10/22/2019	Common Stock, \$0.01 Par Value Per	3,000	\$0	0		D	

**Explanation of Responses:** 

**Grace Holmes** 

05/17/2018

\*\* 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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).