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							

1. Title of Securit	ty (Instr. 3)		2. Transactio Date (Month/Day/\	Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (II 8)		4. Securities Acquire Disposed Of (D) (Inst 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
		Table I - No	n-Derivati	ive Se	ecurities Acq	uired,	Dis	posed of, or Be	nef	icially	Owned		
(City)	(State)	(Zip)									Person		
	17	020 / /									Form filed by Mo		
(Street) HOUSTON	ТХ	77056		4. If An	nendment, Date of	f Original	l Filec	l (Month/Day/Year)		6. Indiv Line) X	vidual or Joint/Grou		
5599 SAN FE	LIPE, 17TH I	LOOR		04/03/							Secretary and (Jelleral Couli	sei
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 04/03/2020						х	Officer (give title below)	below	·
1. Name and Add Juden Alexa		g Person [*]			er Name and Tick LUMBERG			Symbol <u>TED/NV</u> [SLB]		ationship of Reportir all applicable) Director	ng Person(s) to 10% C	
Instruction 1(b)).							es Exchange Act of 1 npany Act of 1940	1934		hours	per response:	0.5

			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(instr. 4)
Common Stock, \$0.01 Par Value Per Share	04/03/2020		A		2,594 ⁽¹⁾	A	\$ <mark>0</mark>	119,027	D	
Common Stock, \$0.01 Par Value Per Share	04/03/2020		F		1,021	D	\$14.19	118,006	D	
Table II -	Derivative Se	curities Acqui	ired, C	Disp	osed of, o	r Bene	ficially (Owned		

(e.g., puts, calls, warrants, options, convertible securities)

			(* 571**	,			,	,				,			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year) if any Code (Instr ce of (Month/Day/Year) 8) ivative	Execution Date, if any	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
			v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

1. The Company granted performance share units ("PSUs") to the reporting person on January 19, 2017. Vesting of the PSUs was based on three-year Company performance relative to select key competitors. Most of these competitors had not reported their 2019 audited financial results when the Company's compensation committee met in January 2020 to certify performance under the PSUs. As a result, the Company's compensation committee approved the issuance of 90% of the shares that the committee determined had been earned according to the information available to the committee at the time. As of April 3, 2020, all such competitors had reported their 2019 audited financial results. Shares of common stock reported hereunder represent shares finally determined to have been earned under the PSUs.

/s/ Saul R. Laureles, Attorney-04/07/2020

<u>in-Fact</u>

** 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.

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See