FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	$D \subset$	20540	
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 and Address of Reporting Person* Prechner Ugo (Last) (First) (Middle) 5599 SAN FELIPE, 17TH FLOOR					3. Da	SCHLUMBERGER LIMITED/NV [SLB] 3. Date of Earliest Transaction (Month/Day/Year) 07/22/2023								(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) UP Controller					
(Street)	ON T	x :	77056		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable le) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Si		Zip)	n Dorin	S s	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											ded to			
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)				ction	tion 2A. Deemed Execution Date,		3. 4. Secur Transaction Dispose Code (Instr. 5)		rities Acquired (A) or ed Of (D) (Instr. 3, 4 a			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	nt (A) or Pr		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock, \$0.01 Par Value Per Share 07/22/2						.023		M		4,58	4,580 A		\$0	14,727 ⁽¹⁾			D			
Common Stock, \$0.01 Par Value Per Share 07/22/						F 1,116 D \$		\$55.6	66 13,611			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)	Title of 2. 3. Transaction 3A. Deemed Execution Date Execution Date, if any		n Date,		ransaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Securities Owned Following Reported Transactio (Instr. 4)	Ownersh Form: y Direct (D or Indirec (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	or Nu of	umber						
RSU (Restricted Stock Unit)	(2)	07/22/2023			M			4,580	(3)		(3)	Commo Stock, \$0.01 Par Value Per Share		,580	\$0	0		D		

Explanation of Responses:

- $1. \ Includes \ 240 \ shares \ for \ the \ period \ ended \ June \ 30, \ 2023, \ that \ were \ acquired \ under \ the \ SLB \ discounted \ stock \ purchase \ plantage \ plant$
- $2.\ Each\ restricted\ stock\ unit\ represents\ the\ right\ to\ receive,\ at\ settlement,\ one\ (1)\ share\ of\ common\ stock.$
- $3.\ The\ restricted\ stock\ unit\ award\ was\ granted\ July\ 22,\ 2020\ and\ vested\ 100\%\ on\ July\ 22,\ 2023.$

<u>/s/ Samantha Blons, Attorney-</u> in-Fact

07/24/2023

** 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.