FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL									
OND AFFROVAL									
OMB Number: 3235-0104									
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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* NOOYI INDRA K 2. Date of Even Requiring State (Month/Day/Yes 04/08/2015				nent	3. Issuer Name and Ticker or Trading Symbol SCHLUMBERGER LTD /NV/ [SLB]								
(Last) 5599 SAN FE	(First)	(Middle)			4. Rela (Check	ntionship of Reporting Perso (all applicable) Director	son(s) to Issuer		5. If Amendment, Date of Original Filed (Month/Day/Year)				
(Street) HOUSTON	TX	77056				Officer (give title below)	Other (sp below)	ecify		icable Line) Form filed b	/Group Filing (Check y One Reporting Person y More than One erson		
(City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned													
1. Title of Security (Instr. 4)				2	2. Amou	int of Securities ially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock, \$0.01 Par Value Per Share						11,800	D						
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)													
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable a Expiration Date (Month/Day/Year)			ate	Underlying Derivative Security (Instr. 4) Conv				6. Nature of Indirect Beneficial Ownership (Instr. 5)					
			Date Exercisable	Expiration Date	n Title	3	Amount or Number of Shares	Price Deriva Secur	ative	Direct (D) or Indirect (I) (Instr. 5)			

Explanation of Responses:

Saul R. Laureles, Attorney-in-04/17/2015

Fact

** 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.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (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).