FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								

0.5

hours per response:

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

											ilpaily Act										
1. Name and Address of Reporting Person*						2. Issuer Name <b>and</b> Ticker or Trading Symbol SCHLUMBERGER LTD /NV/ [SLB]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Olayan Lubna S.</u>				1	SCHOOL STATE OF THE SERVICE OF THE S									X	Direc	tor		10% C	wner		
(Last) (First) (Middle) 5599 SAN FELIPE, 17TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 07/21/2015										Officer (give title below)			Other below)	(specify		
, and the second					4 If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)	ON TX	ζ 7	77056			,		, 200	o. o.,ga i nod (nonanody) roda)						ne) X	Form filed by One Reporting Person Form filed by More than One Reporting Person				on	
(City)	(St	ate) (	Zip)													1 013	OII				
		Tabl	e I - No	n-Deriv	ative	Se	curiti	es Ac	quired,	Dis	posed o	f, or I	3en	eficia	ally O	wne	ed				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day)					r) E	A. Deem xecution any Month/D	Date,			ies Acquired (A) o Of (D) (Instr. 3, 4			and 5) Sec Ber Ow		ount of ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	or	Price	1	Reported Transaction(s) (Instr. 3 and 4)				(1130.4)	
Common Stock, \$0.01 Par Value Per Share 07/21				/2015	2015		P		5,000	1	A \$83.81		316	16,250		D					
		Та									sed of, onvertib				y Ow	ned					
erivative Conversion Date		3. Transaction Date (Month/Day/Year)	Executio if any	Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Date Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amount or Numbe of Shares		ount nber	8. Pric Deriva Securi (Instr.	tive ty	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Form Direct or In (I) (Ir		11. Nature of Indirect Beneficial Ownership (Instr. 4)	

**Explanation of Responses:** 

/s/ Saul R. Laureles, Attorney-

07/22/2015

in-Fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.