FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| wasiiiigtoii, | D.C. | 20349 | |
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|--|--------------------------|-----------|--|--|
| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: | 3235-0287 | | |
| | Estimated average burden | | | |

hours per response:

0.5

| | Check this box if no longer subject to |
|---|--|
| ١ | Section 16. Form 4 or Form 5 |
| J | 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

| (Last) | | 1. Name and Address of Reporting Person* <u>LAJOUS ADRIAN</u> | | | | 2. Issuer Name and Ticker or Trading Symbol SCHLUMBERGER LTD /NV/ [SLB] | | | | | | | | | | all app | ionship of Reportinç all applicable) Director | | 10% C | | |
|--|--|---|--|---------|---|--|-----------------------|---|------------------------|-----|---|-------------------|--------------|--|--|--|---|---------------------------------------|---|---------------------------------|--|
| (Last) (First) (Middle) 5599 SAN FELIPE, 17TH FLOOR | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/30/2013 | | | | | | | | | | | Office below | | | Other below) | (specify | |
| (Street) HOUSTO | N TX | | 77056 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | i. Indiv ine) X | Form Form | dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tabl | e I - Nor | n-Deriv | ative | Se | curitie | s Acc | quired, | Dis | posed o | f, o | Ben | efici | ally | Owne | ed | | | | |
| =: : o: coou (c o) | | | 2. Transaction Date (Month/Day/Year) | | ar) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | | | | | , 4 and Sec Ber Ow | | . Amount of ecurities eneficially wned Following | | ership Direct ndirect r. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | Amount (A) or (D) | | Pric | e | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | |
| Common Stock, \$0.01 par value per share | | | | | | | | | | | | | | | | 14,232 | | | I | limited liability company | |
| Common Stock, \$0.01 par value per share 04/30 | | | | | /2013 | | A ⁽¹⁾ | | 2,250 ⁽²⁾ A | | A | \$ | 0 | 19,250 | | 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) 2. Conversion or Exercise Price of Derivative Security Security 2. Conversion Date (Month/Day/Year) (Month/Day/Year) 3A. Deemed Execution Date if any (Month/Day/Year) | | | Date, | | ransaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiratio (Month/D | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | Deri Secu | Price of erivative ecurity 1str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | m: ect (D) ndirect | Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

- 1. Pursuant to Schlumberger Limited Stock and Deferral Plan for Non-Employee Directors.
- 2. Receipt of 2,250 shares deferred until the date of Mr. Lajous' termination of service as a director of Schlumberger Limited.

Saul R. Laureles, Attorney-in-Fact

04/30/2013

** 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.