## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Woodburn Charles						2. Issuer Name and Ticker or Trading Symbol SCHLUMBERGER LTD /NV/ [ SLB ]										Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director					
	HLUMBER	irst) GER LIMITED 17TH FLOOR	(Middle)		02	/12/2	2010					Day/Year)	X	below)	Officer (give title Other (specification)  VICE PRESIDENT						
(Street)	ON T	x	77056				endme	nt, Date	of Origi	nal Fil	led	(Month/Da	Individual or Joint/Group Filing (Check Applicable Line)      X Form filed by One Reporting Person      Form filed by More than One Reporting Person								
(City)	(S	tate)	(Zip)																		
Table I - Non-Deriv  1. Title of Security (Instr. 3)  2. Transa Date (Month/D				saction	ar) i	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Trar Cod	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			or 5. Amo 4 and 5) Securi Benefi		nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Cod	le V		Amount	(A) o (D)	Pr	rice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	Stock			02/12/2010		0						3,000	A \$3		36.516	6 10,195		D			
Common Stock			02/12/2010		0						2,615	515 D \$		64.01	1 7,580		D				
Common Stock			02/1	02/12/2010							5,000	A	\$	27.873 12		2,580		D			
Common Stock			02/1	02/12/2010				S			4,155	D	\$	\$64.01		8,425		D			
Common Stock			02/1	02/12/2010				М			5,000	A	\$	32.618 13		3,425		D			
Common Stock 02/12/			2/2010	2010			S			4,267 D S		\$	64.01	9,158			D				
			Table II -									osed of, onvertil				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		ransaction ode (Instr.		n of E		6. Date Exercisi Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Se (Instr. 3 and 4		urity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e Coss Fally Coss G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	ate xercisable		Expiration Date	Title	or Nu of	nount mber ares						
Employee Stock Option (right to buy) w/ tandem Tx w/h right	\$32.618	02/12/2010			M			5,000	07/21/2	:005 <sup>(1)</sup>	C	07/21/2014	Commor Stock	5,	000	\$0	0		D		
Employee Stock Option (right to buy) w/ tandem Tx w/h right	\$36.516	02/12/2010			M			3,000	04/19/2	001 <sup>(2)</sup>	C	04/19/2010	Commor Stock	3,	000	\$0	0		D		
Incentive Stock Option	\$27.873	02/12/2010			M			5,000	04/17/2	:003 <sup>(3)</sup>	0	04/17/2012	Commor Stock	5,	000	\$0	0		D		

## **Explanation of Responses:**

(right to

- 1. This option becomes exercisable in four equal annual installments beginning July 21, 2005
- $2. \ The \ option \ became \ exercisable \ in \ five \ equal \ annual \ installments \ beginning \ April \ 19,2001.$
- 3. Exercisable in five equal annual installments beginning April 17,2003.

By: /s/Lynda M.Quagliara Attorney-in-Fact For: Charles Woodburn

02/16/2010

\*\* Signature of Reporting Person

Date

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

<sup>\*</sup> 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.