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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| <b>Form 5500</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security<br>Administration<br><br>Pension Benefit Guaranty Corporation | <b>Annual Return/Report of Employee Benefit Plan</b><br>This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).<br><br><b>▶ Complete all entries in accordance with the instructions to the Form 5500.</b> | OMB Nos. 1210-0110<br>1210-0089<br><br><b>2018</b><br><br><b>This Form is Open to Public Inspection</b> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|

|                                                                                                          |                                                                                                          |                                                                                                                                                                                                                                             |  |
|----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Part I</b>                                                                                            | <b>Annual Report Identification Information</b>                                                          |                                                                                                                                                                                                                                             |  |
| For calendar plan year 2018 or fiscal plan year beginning <u>01/01/2018</u> and ending <u>12/31/2018</u> |                                                                                                          |                                                                                                                                                                                                                                             |  |
| <b>A</b>                                                                                                 | This return/report is for:                                                                               | <input type="checkbox"/> a multiemployer plan <input type="checkbox"/> a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)               |  |
|                                                                                                          | <input checked="" type="checkbox"/> a single-employer plan <input type="checkbox"/> a DFE (specify) ____ |                                                                                                                                                                                                                                             |  |
| <b>B</b>                                                                                                 | This return/report is:                                                                                   | <input type="checkbox"/> the first return/report<br><input type="checkbox"/> the final return/report<br><input type="checkbox"/> an amended return/report<br><input type="checkbox"/> a short plan year return/report (less than 12 months) |  |
| <b>C</b>                                                                                                 | If the plan is a collectively-bargained plan, check here. . . . . <input type="checkbox"/>               |                                                                                                                                                                                                                                             |  |
| <b>D</b>                                                                                                 | Check box if filing under:                                                                               | <input checked="" type="checkbox"/> Form 5558 <input type="checkbox"/> automatic extension <input type="checkbox"/> the DFVC program                                                                                                        |  |
|                                                                                                          | <input type="checkbox"/> special extension (enter description)                                           |                                                                                                                                                                                                                                             |  |

|                |                                                                                                                                                                                                                                                                                                                                                                                                                             |           |                                                           |
|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------------------------------------|
| <b>Part II</b> | <b>Basic Plan Information</b> —enter all requested information                                                                                                                                                                                                                                                                                                                                                              |           |                                                           |
| <b>1a</b>      | Name of plan<br><u>SCHLUMBERGER TECHNOLOGY CORPORATION PENSION PLAN</u>                                                                                                                                                                                                                                                                                                                                                     | <b>1b</b> | Three-digit plan number (PN) ▶ <u>007</u>                 |
|                |                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>1c</b> | Effective date of plan<br><u>01/01/1999</u>               |
| <b>2a</b>      | Plan sponsor's name (employer, if for a single-employer plan)<br>Mailing address (include room, apt., suite no. and street, or P.O. Box)<br>City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)<br><u>SCHLUMBERGER TECHNOLOGY CORPORATION</u><br><br><u>SCHLUMBERGER REGIONAL SUPPORT CTR</u><br><u>3600 BRIARPARK DR., 3RD FLOOR, MD-4</u><br><u>HOUSTON, TX 77042</u> | <b>2b</b> | Employer Identification Number (EIN)<br><u>22-1692661</u> |
|                |                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>2c</b> | Plan Sponsor's telephone number<br><u>281-285-8500</u>    |
|                |                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>2d</b> | Business code (see instructions)<br><u>541990</u>         |
|                |                                                                                                                                                                                                                                                                                                                                                                                                                             |           |                                                           |

**Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.**

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

|                  |                                                   |            |                                                              |
|------------------|---------------------------------------------------|------------|--------------------------------------------------------------|
| <b>SIGN HERE</b> | Filed with authorized/valid electronic signature. | 10/14/2019 | LORRAINE MAH                                                 |
|                  | Signature of plan administrator                   | Date       | Enter name of individual signing as plan administrator       |
| <b>SIGN HERE</b> |                                                   |            |                                                              |
|                  | Signature of employer/plan sponsor                | Date       | Enter name of individual signing as employer or plan sponsor |
| <b>SIGN HERE</b> |                                                   |            |                                                              |
|                  | Signature of DFE                                  | Date       | Enter name of individual signing as DFE                      |

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2018)  
v. 171027

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>3b</b> Administrator's EIN<br><br><b>3c</b> Administrator's telephone number<br><br><div style="background-color: #cccccc; height: 40px; width: 100%;"></div> |
| <b>4</b> If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:<br><b>a</b> Sponsor's name<br><b>c</b> Plan Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>4b</b> EIN<br><br><b>4d</b> PN                                                                                                                                |
| <b>5</b> Total number of participants at the beginning of the plan year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>5</b> 25677                                                                                                                                                   |
| <b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ).<br><br><b>a(1)</b> Total number of active participants at the beginning of the plan year .....<br><b>a(2)</b> Total number of active participants at the end of the plan year .....<br><br><b>b</b> Retired or separated participants receiving benefits.....<br><b>c</b> Other retired or separated participants entitled to future benefits .....<br><b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> .....<br><b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. ....<br><b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> .....<br><br><b>g</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) .....<br><br><b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested ..... | <b>6a(1)</b> 3809<br><b>6a(2)</b> 3490<br><b>6b</b> 12262<br><b>6c</b> 7762<br><b>6d</b> 23514<br><b>6e</b> 1800<br><b>6f</b> 25314<br><b>6g</b><br><b>6h</b> 0  |
| <b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>7</b>                                                                                                                                                         |

**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

1A 1E 3H

**b** If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

|                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>9a</b> Plan funding arrangement (check all that apply)<br><b>(1)</b> <input checked="" type="checkbox"/> Insurance<br><b>(2)</b> <input type="checkbox"/> Code section 412(e)(3) insurance contracts<br><b>(3)</b> <input checked="" type="checkbox"/> Trust<br><b>(4)</b> <input type="checkbox"/> General assets of the sponsor | <b>9b</b> Plan benefit arrangement (check all that apply)<br><b>(1)</b> <input checked="" type="checkbox"/> Insurance<br><b>(2)</b> <input type="checkbox"/> Code section 412(e)(3) insurance contracts<br><b>(3)</b> <input checked="" type="checkbox"/> Trust<br><b>(4)</b> <input type="checkbox"/> General assets of the sponsor |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**10** Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

**a Pension Schedules**

- (1)** ☒ **R** (Retirement Plan Information)
- (2)** ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3)** ☒ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

**b General Schedules**

- (1)** ☒ **H** (Financial Information)
- (2)** ☐ **I** (Financial Information – Small Plan)
- (3)** ☐ 0 **A** (Insurance Information)
- (4)** ☐ **C** (Service Provider Information)
- (5)** ☒ **D** (DFE/Participating Plan Information)
- (6)** ☐ **G** (Financial Transaction Schedules)

**Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)**

**11a** If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

**11b** Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

**11c** Enter the Receipt Confirmation Code for the 2018 Form M-1 annual report. If the plan was not required to file the 2018 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code \_\_\_\_\_

|                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                              |                                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| <b>SCHEDULE SB<br/>(Form 5500)</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security Administration<br><br>Pension Benefit Guaranty Corporation | <b>Single-Employer Defined Benefit Plan<br/>Actuarial Information</b><br><br>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).<br><br>▶ <b>File as an attachment to Form 5500 or 5500-SF.</b> | OMB No. 1210-0110<br><br><b>2018</b><br><br><b>This Form is Open to Public Inspection</b> |
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|                                                                                                                                           |                                                                                                                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| For calendar plan year 2018 or fiscal plan year beginning <u>01/01/2018</u> and ending <u>12/31/2018</u>                                  |                                                                                                                                                         |
| ▶ <b>Round off amounts to nearest dollar.</b>                                                                                             |                                                                                                                                                         |
| ▶ <b>Caution:</b> A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.            |                                                                                                                                                         |
| <b>A</b> Name of plan<br><u>SCHLUMBERGER TECHNOLOGY CORPORATION PENSION PLAN</u>                                                          | <b>B</b> Three-digit plan number (PN) ▶ <u>007</u>                                                                                                      |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF<br><u>SCHLUMBERGER TECHNOLOGY CORPORATION</u>                    | <b>D</b> Employer Identification Number (EIN)<br><u>22-1692661</u>                                                                                      |
| <b>E</b> Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B | <b>F</b> Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500 |

|                                                                                                                                                                                                                 |                                                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| <b>Part I</b>                                                                                                                                                                                                   | <b>Basic Information</b>                                                      |
| <b>1</b> Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2018</u>                                                                                                                               |                                                                               |
| <b>2</b> Assets:                                                                                                                                                                                                |                                                                               |
| <b>a</b> Market value.....                                                                                                                                                                                      | <b>2a</b> <u>4023979368</u>                                                   |
| <b>b</b> Actuarial value .....                                                                                                                                                                                  | <b>2b</b> <u>3714573540</u>                                                   |
| <b>3</b> Funding target/participant count breakdown                                                                                                                                                             | (1) Number of participants (2) Vested Funding Target (3) Total Funding Target |
| <b>a</b> For retired participants and beneficiaries receiving payment .....                                                                                                                                     | <u>13799</u> <u>2185414031</u> <u>2185414031</u>                              |
| <b>b</b> For terminated vested participants .....                                                                                                                                                               | <u>8069</u> <u>375592105</u> <u>375592105</u>                                 |
| <b>c</b> For active participants .....                                                                                                                                                                          | <u>3809</u> <u>578971131</u> <u>624101763</u>                                 |
| <b>d</b> Total .....                                                                                                                                                                                            | <u>25677</u> <u>3139977267</u> <u>3185107899</u>                              |
| <b>4</b> If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>                                                                                           |                                                                               |
| <b>a</b> Funding target disregarding prescribed at-risk assumptions .....                                                                                                                                       | <b>4a</b>                                                                     |
| <b>b</b> Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor ..... | <b>4b</b>                                                                     |
| <b>5</b> Effective interest rate .....                                                                                                                                                                          | <b>5</b> <u>5.72 %</u>                                                        |
| <b>6</b> Target normal cost .....                                                                                                                                                                               | <b>6</b> <u>60075300</u>                                                      |

**Statement by Enrolled Actuary**  
To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

|                                                         |                                        |
|---------------------------------------------------------|----------------------------------------|
| <b>SIGN HERE</b>                                        |                                        |
| Signature of actuary                                    | <u>10/02/2019</u>                      |
| <u>MICHAEL J. MARKS, FSA, MAAA</u>                      | Date                                   |
| Type or print name of actuary                           | <u>17-06062</u>                        |
| <u>SIBSON CONSULTING</u>                                | Most recent enrollment number          |
| Firm name                                               | <u>212-251-5000</u>                    |
| <u>333 WEST 34TH STREET<br/>NEW YORK, NY 10001-2402</u> | Telephone number (including area code) |
| Address of the firm                                     |                                        |

**Part II Beginning of Year Carryover and Prefunding Balances**

|                                                                                                                                                                      | (a) Carryover balance | (b) Prefunding balance |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|------------------------|
| <b>7</b> Balance at beginning of prior year after applicable adjustments (line 13 from prior year) .....                                                             | 77241783              | 733625648              |
| <b>8</b> Portion elected for use to offset prior year's funding requirement (line 35 from prior year) .....                                                          | 57557791              | 0                      |
| <b>9</b> Amount remaining (line 7 minus line 8) .....                                                                                                                | 19683992              | 733625648              |
| <b>10</b> Interest on line 9 using prior year's actual return of <u>18.21</u> % .....                                                                                | 3584455               | 133593231              |
| <b>11</b> Prior year's excess contributions to be added to prefunding balance:                                                                                       |                       |                        |
| <b>a</b> Present value of excess contributions (line 38a from prior year) .....                                                                                      |                       | 0                      |
| <b>b(1)</b> Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.92</u> % ..... |                       | 0                      |
| <b>b(2)</b> Interest on line 38b from prior year Schedule SB, using prior year's actual return .....                                                                 |                       | 0                      |
| <b>c</b> Total available at beginning of current plan year to add to prefunding balance .....                                                                        |                       | 0                      |
| <b>d</b> Portion of (c) to be added to prefunding balance .....                                                                                                      |                       | 0                      |
| <b>12</b> Other reductions in balances due to elections or deemed elections .....                                                                                    | 0                     | 0                      |
| <b>13</b> Balance at beginning of current year (line 9 + line 10 + line 11d – line 12) .....                                                                         | 23268447              | 867218879              |

**Part III Funding Percentages**

|                                                                                                                                                                            |           |         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------|
| <b>14</b> Funding target attainment percentage .....                                                                                                                       | <b>14</b> | 88.66%  |
| <b>15</b> Adjusted funding target attainment percentage .....                                                                                                              | <b>15</b> | 116.62% |
| <b>16</b> Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement ..... | <b>16</b> | 93.77%  |
| <b>17</b> If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage. ....                                        | <b>17</b> | %       |

**Part IV Contributions and Liquidity Shortfalls****18** Contributions made to the plan for the plan year by employer(s) and employees:

| (a) Date<br>(MM-DD-YYYY) | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees | (a) Date<br>(MM-DD-YYYY) | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees |
|--------------------------|-----------------------------------|---------------------------------|--------------------------|-----------------------------------|---------------------------------|
|                          |                                   |                                 |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
| <b>Totals ▶</b>          |                                   |                                 | <b>18(b)</b>             | 0                                 | <b>18(c)</b> 0                  |

**19** Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

|                                                                                                                         |            |   |
|-------------------------------------------------------------------------------------------------------------------------|------------|---|
| <b>a</b> Contributions allocated toward unpaid minimum required contributions from prior years .....                    | <b>19a</b> | 0 |
| <b>b</b> Contributions made to avoid restrictions adjusted to valuation date .....                                      | <b>19b</b> | 0 |
| <b>c</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date ..... | <b>19c</b> | 0 |

**20** Quarterly contributions and liquidity shortfalls:

- a** Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No
- b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☒ Yes ☐ No
- c** If line 20a is "Yes," see instructions and complete the following table as applicable:

| Liquidity shortfall as of end of quarter of this plan year |         |         |         |
|------------------------------------------------------------|---------|---------|---------|
| (1) 1st                                                    | (2) 2nd | (3) 3rd | (4) 4th |
| 0                                                          | 0       | 0       | 0       |

**Part V Assumptions Used to Determine Funding Target and Target Normal Cost**

|                                                 |                       |                                                |                                                           |                                                     |
|-------------------------------------------------|-----------------------|------------------------------------------------|-----------------------------------------------------------|-----------------------------------------------------|
| <b>21</b> Discount rate:                        |                       |                                                |                                                           |                                                     |
| <b>a</b> Segment rates:                         | 1st segment:<br>3.92% | 2nd segment:<br>5.52%                          | 3rd segment:<br>6.29%                                     | <input type="checkbox"/> N/A, full yield curve used |
| <b>b</b> Applicable month (enter code) .....    |                       |                                                |                                                           | <b>21b</b> 4                                        |
| <b>22</b> Weighted average retirement age ..... |                       |                                                |                                                           | <b>22</b> 61                                        |
| <b>23</b> Mortality table(s) (see instructions) | Prior regulation:     | <input type="checkbox"/> Prescribed - combined | <input checked="" type="checkbox"/> Prescribed - separate | <input type="checkbox"/> Substitute                 |
|                                                 | Current regulation:   | <input type="checkbox"/> Prescribed - combined | <input type="checkbox"/> Prescribed - separate            | <input type="checkbox"/> Substitute                 |

**Part VI Miscellaneous Items**

|                                                                                                                                                                        |                                         |                                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------|
| <b>24</b> Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. .... | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| <b>25</b> Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ....                                      | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| <b>26</b> Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ....                            | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| <b>27</b> If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment .....                                   | <b>27</b>                               |                                        |

**Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years**

|                                                                                                                                      |           |   |
|--------------------------------------------------------------------------------------------------------------------------------------|-----------|---|
| <b>28</b> Unpaid minimum required contributions for all prior years .....                                                            | <b>28</b> | 0 |
| <b>29</b> Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a) ..... | <b>29</b> | 0 |
| <b>30</b> Remaining amount of unpaid minimum required contributions (line 28 minus line 29) .....                                    | <b>30</b> | 0 |

**Part VIII Minimum Required Contribution For Current Year**

|                                                                                                                                                                                      |                     |                    |               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|---------------|
| <b>31</b> Target normal cost and excess assets (see instructions):                                                                                                                   |                     |                    |               |
| <b>a</b> Target normal cost (line 6) .....                                                                                                                                           | <b>31a</b>          | 60075300           |               |
| <b>b</b> Excess assets, if applicable, but not greater than line 31a .....                                                                                                           | <b>31b</b>          | 0                  |               |
| <b>32</b> Amortization installments:                                                                                                                                                 | Outstanding Balance | Installment        |               |
| <b>a</b> Net shortfall amortization installment .....                                                                                                                                | 361021684           | 58936542           |               |
| <b>b</b> Waiver amortization installment .....                                                                                                                                       | 0                   | 0                  |               |
| <b>33</b> If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount ..... | <b>33</b>           |                    |               |
| <b>34</b> Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33) .....                                                         | <b>34</b>           | 119011842          |               |
|                                                                                                                                                                                      | Carryover balance   | Prefunding balance | Total balance |
| <b>35</b> Balances elected for use to offset funding requirement .....                                                                                                               | 23268447            | 95743395           | 119011842     |
| <b>36</b> Additional cash requirement (line 34 minus line 35) .....                                                                                                                  | <b>36</b>           | 0                  |               |
| <b>37</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) .....                                                  | <b>37</b>           | 0                  |               |
| <b>38</b> Present value of excess contributions for current year (see instructions)                                                                                                  |                     |                    |               |
| <b>a</b> Total (excess, if any, of line 37 over line 36) .....                                                                                                                       | <b>38a</b>          | 0                  |               |
| <b>b</b> Portion included in line 38a attributable to use of prefunding and funding standard carryover balances .....                                                                | <b>38b</b>          |                    |               |
| <b>39</b> Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) .....                                                                      | <b>39</b>           | 0                  |               |
| <b>40</b> Unpaid minimum required contributions for all years .....                                                                                                                  | <b>40</b>           | 0                  |               |

**Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)**

|                                                                                  |                                                                                                                         |
|----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|
| <b>41</b> If an election was made to use PRA 2010 funding relief for this plan:  |                                                                                                                         |
| <b>a</b> Schedule elected .....                                                  | <input type="checkbox"/> 2 plus 7 years <input type="checkbox"/> 15 years                                               |
| <b>b</b> Eligible plan year(s) for which the election in line 41a was made ..... | <input type="checkbox"/> 2008 <input type="checkbox"/> 2009 <input type="checkbox"/> 2010 <input type="checkbox"/> 2011 |

|                                                                                                                                                                                              |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|--|
| <div>SCHEDULE D</div> <div>(Form 5500)</div> <div>Department of the Treasury<br/>Internal Revenue Service</div> <div>Department of Labor<br/>Employee Benefits Security Administration</div> |  | <div>DFE/Participating Plan Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div> |                                                                                                         | <div>OMB No. 1210-0110</div> <div>2018</div> <div>This Form is Open to Public Inspection.</div> |  |
| For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| A Name of plan<br>SCHLUMBERGER TECHNOLOGY CORPORATION PENSION PLAN                                                                                                                           |  |                                                                                                                                                                                                                                   |                                                                                                         | B Three-digit plan number (PN) ▶ 007                                                            |  |
| C Plan or DFE sponsor's name as shown on line 2a of Form 5500<br>SCHLUMBERGER TECHNOLOGY CORPORATION                                                                                         |  |                                                                                                                                                                                                                                   |                                                                                                         | D Employer Identification Number (EIN)<br>22-1692661                                            |  |
| Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)<br>(Complete as many entries as needed to report all interests in DFEs)             |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE: SCHLUMBERGER MASTER PENSION TRUST                                                                                                                    |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a): SCHLUMBERGER LIMITED                                                                                                                              |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN 36-6913037-001                                                                                                                                                                      |  | d Entity code M                                                                                                                                                                                                                   | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4022840949 |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)            |                                                                                                 |  |
| a Name of MTIA, CCT, PSA, or 103-12 IE:                                                                                                                                                      |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| b Name of sponsor of entity listed in (a):                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                         |                                                                                                 |  |
| c EIN-PN                                                                                                                                                                                     |  | d Entity code                                                                                                                                                                                                                     | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of                                    |                                                                                                 |  |

**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity  
code**e** Dollar value of interest in MTIA, CCT, PSA, or  
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity  
code**e** Dollar value of interest in MTIA, CCT, PSA, or  
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity  
code**e** Dollar value of interest in MTIA, CCT, PSA, or  
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity  
code**e** Dollar value of interest in MTIA, CCT, PSA, or  
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity  
code**e** Dollar value of interest in MTIA, CCT, PSA, or  
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity  
code**e** Dollar value of interest in MTIA, CCT, PSA, or  
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity  
code**e** Dollar value of interest in MTIA, CCT, PSA, or  
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity  
code**e** Dollar value of interest in MTIA, CCT, PSA, or  
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity  
code**e** Dollar value of interest in MTIA, CCT, PSA, or  
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity  
code**e** Dollar value of interest in MTIA, CCT, PSA, or  
103-12 IE at end of year (see instructions)

**Part II Information on Participating Plans (to be completed by DFEs)**

(Complete as many entries as needed to report all participating plans)

**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN

|                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                              |                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| <b>SCHEDULE H</b><br><b>(Form 5500)</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security Administration<br>Pension Benefit Guaranty Corporation | <b>Financial Information</b><br><br>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).<br><br><b>► File as an attachment to Form 5500.</b> | OMB No. 1210-0110                             |
|                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                              | <b>2018</b>                                   |
|                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                              | <b>This Form is Open to Public Inspection</b> |

|                                                                                                             |                                                                    |
|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| For calendar plan year 2018 or fiscal plan year beginning <b>01/01/2018</b> and ending <b>12/31/2018</b>    |                                                                    |
| <b>A</b> Name of plan<br><b>SCHLUMBERGER TECHNOLOGY CORPORATION PENSION PLAN</b>                            | <b>B</b> Three-digit plan number (PN) <b>►</b> <b>007</b>          |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500<br><b>SCHLUMBERGER TECHNOLOGY CORPORATION</b> | <b>D</b> Employer Identification Number (EIN)<br><b>22-1692661</b> |

|               |                                      |
|---------------|--------------------------------------|
| <b>Part I</b> | <b>Asset and Liability Statement</b> |
|---------------|--------------------------------------|

**1** Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

| Assets                                                                                            |                 | (a) Beginning of Year | (b) End of Year |
|---------------------------------------------------------------------------------------------------|-----------------|-----------------------|-----------------|
| <b>a</b> Total noninterest-bearing cash .....                                                     | <b>1a</b>       |                       |                 |
| <b>b</b> Receivables (less allowance for doubtful accounts):                                      |                 |                       |                 |
| <b>(1)</b> Employer contributions.....                                                            | <b>1b(1)</b>    |                       |                 |
| <b>(2)</b> Participant contributions .....                                                        | <b>1b(2)</b>    |                       |                 |
| <b>(3)</b> Other.....                                                                             | <b>1b(3)</b>    |                       |                 |
| <b>c</b> General investments:                                                                     |                 |                       |                 |
| <b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit).....   | <b>1c(1)</b>    |                       |                 |
| <b>(2)</b> U.S. Government securities .....                                                       | <b>1c(2)</b>    |                       |                 |
| <b>(3)</b> Corporate debt instruments (other than employer securities):                           |                 |                       |                 |
| <b>(A)</b> Preferred .....                                                                        | <b>1c(3)(A)</b> |                       |                 |
| <b>(B)</b> All other.....                                                                         | <b>1c(3)(B)</b> |                       |                 |
| <b>(4)</b> Corporate stocks (other than employer securities):                                     |                 |                       |                 |
| <b>(A)</b> Preferred .....                                                                        | <b>1c(4)(A)</b> |                       |                 |
| <b>(B)</b> Common.....                                                                            | <b>1c(4)(B)</b> |                       |                 |
| <b>(5)</b> Partnership/joint venture interests .....                                              | <b>1c(5)</b>    |                       |                 |
| <b>(6)</b> Real estate (other than employer real property).....                                   | <b>1c(6)</b>    |                       |                 |
| <b>(7)</b> Loans (other than to participants) .....                                               | <b>1c(7)</b>    |                       |                 |
| <b>(8)</b> Participant loans.....                                                                 | <b>1c(8)</b>    |                       |                 |
| <b>(9)</b> Value of interest in common/collective trusts .....                                    | <b>1c(9)</b>    |                       |                 |
| <b>(10)</b> Value of interest in pooled separate accounts .....                                   | <b>1c(10)</b>   |                       |                 |
| <b>(11)</b> Value of interest in master trust investment accounts .....                           | <b>1c(11)</b>   | 4397949478            | 4022840949      |
| <b>(12)</b> Value of interest in 103-12 investment entities.....                                  | <b>1c(12)</b>   |                       |                 |
| <b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds).....        | <b>1c(13)</b>   |                       |                 |
| <b>(14)</b> Value of funds held in insurance company general account (unallocated contracts)..... | <b>1c(14)</b>   |                       |                 |
| <b>(15)</b> Other .....                                                                           | <b>1c(15)</b>   |                       |                 |

|                    |                                                                  | (a) Beginning of Year | (b) End of Year       |
|--------------------|------------------------------------------------------------------|-----------------------|-----------------------|
| <b>1d</b>          | Employer-related investments:                                    |                       |                       |
| (1)                | Employer securities .....                                        | <b>1d(1)</b>          |                       |
| (2)                | Employer real property .....                                     | <b>1d(2)</b>          |                       |
| <b>e</b>           | Buildings and other property used in plan operation .....        | <b>1e</b>             |                       |
| <b>f</b>           | Total assets (add all amounts in lines 1a through 1e) .....      | <b>1f</b>             | 4397949478 4022840949 |
| <b>Liabilities</b> |                                                                  |                       |                       |
| <b>g</b>           | Benefit claims payable .....                                     | <b>1g</b>             |                       |
| <b>h</b>           | Operating payables .....                                         | <b>1h</b>             | 3384117 1812808       |
| <b>i</b>           | Acquisition indebtedness .....                                   | <b>1i</b>             |                       |
| <b>j</b>           | Other liabilities .....                                          | <b>1j</b>             |                       |
| <b>k</b>           | Total liabilities (add all amounts in lines 1g through 1j) ..... | <b>1k</b>             | 3384117 1812808       |
| <b>Net Assets</b>  |                                                                  |                       |                       |
| <b>l</b>           | Net assets (subtract line 1k from line 1f) .....                 | <b>1l</b>             | 4394565361 4021028141 |

**Part II Income and Expense Statement**

**2** Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

|          |                                                                                                        | (a) Amount      | (b) Total |
|----------|--------------------------------------------------------------------------------------------------------|-----------------|-----------|
| <b>a</b> | <b>Contributions:</b>                                                                                  |                 |           |
| (1)      | Received or receivable in cash from: <b>(A)</b> Employers .....                                        | <b>2a(1)(A)</b> |           |
|          | <b>(B)</b> Participants .....                                                                          | <b>2a(1)(B)</b> |           |
|          | <b>(C)</b> Others (including rollovers) .....                                                          | <b>2a(1)(C)</b> |           |
| (2)      | Noncash contributions .....                                                                            | <b>2a(2)</b>    |           |
| (3)      | Total contributions. Add lines <b>2a(1)(A)</b> , <b>(B)</b> , <b>(C)</b> , and line <b>2a(2)</b> ..... | <b>2a(3)</b>    | 0         |
| <b>b</b> | <b>Earnings on investments:</b>                                                                        |                 |           |
| (1)      | Interest:                                                                                              |                 |           |
|          | <b>(A)</b> Interest-bearing cash (including money market accounts and certificates of deposit) .....   | <b>2b(1)(A)</b> |           |
|          | <b>(B)</b> U.S. Government securities .....                                                            | <b>2b(1)(B)</b> |           |
|          | <b>(C)</b> Corporate debt instruments .....                                                            | <b>2b(1)(C)</b> |           |
|          | <b>(D)</b> Loans (other than to participants) .....                                                    | <b>2b(1)(D)</b> |           |
|          | <b>(E)</b> Participant loans .....                                                                     | <b>2b(1)(E)</b> |           |
|          | <b>(F)</b> Other .....                                                                                 | <b>2b(1)(F)</b> |           |
|          | <b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....                          | <b>2b(1)(G)</b> | 0         |
| (2)      | Dividends: <b>(A)</b> Preferred stock .....                                                            | <b>2b(2)(A)</b> |           |
|          | <b>(B)</b> Common stock .....                                                                          | <b>2b(2)(B)</b> |           |
|          | <b>(C)</b> Registered investment company shares (e.g. mutual funds) .....                              | <b>2b(2)(C)</b> |           |
|          | <b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....              | <b>2b(2)(D)</b> |           |
| (3)      | Rents .....                                                                                            | <b>2b(3)</b>    |           |
| (4)      | Net gain (loss) on sale of assets: <b>(A)</b> Aggregate proceeds .....                                 | <b>2b(4)(A)</b> |           |
|          | <b>(B)</b> Aggregate carrying amount (see instructions) .....                                          | <b>2b(4)(B)</b> |           |
|          | <b>(C)</b> Subtract line <b>2b(4)(B)</b> from line <b>2b(4)(A)</b> and enter result .....              | <b>2b(4)(C)</b> |           |
| (5)      | Unrealized appreciation (depreciation) of assets: <b>(A)</b> Real estate .....                         | <b>2b(5)(A)</b> |           |
|          | <b>(B)</b> Other .....                                                                                 | <b>2b(5)(B)</b> |           |
|          | <b>(C)</b> Total unrealized appreciation of assets. Add lines <b>2b(5)(A)</b> and <b>(B)</b> .....     | <b>2b(5)(C)</b> |           |

|                                                                                                |        | (a) Amount | (b) Total  |
|------------------------------------------------------------------------------------------------|--------|------------|------------|
| (6) Net investment gain (loss) from common/collective trusts .....                             | 2b(6)  |            |            |
| (7) Net investment gain (loss) from pooled separate accounts .....                             | 2b(7)  |            |            |
| (8) Net investment gain (loss) from master trust investment accounts .....                     | 2b(8)  |            | -178629275 |
| (9) Net investment gain (loss) from 103-12 investment entities .....                           | 2b(9)  |            |            |
| (10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)..... | 2b(10) |            |            |
| c Other income.....                                                                            | 2c     |            |            |
| d Total income. Add all <b>income</b> amounts in column (b) and enter total .....              | 2d     |            | -178629275 |

**Expenses**

|                                                                                      |       |           |           |
|--------------------------------------------------------------------------------------|-------|-----------|-----------|
| e Benefit payment and payments to provide benefits:                                  |       |           |           |
| (1) Directly to participants or beneficiaries, including direct rollovers .....      | 2e(1) | 194907945 |           |
| (2) To insurance carriers for the provision of benefits .....                        | 2e(2) |           |           |
| (3) Other .....                                                                      | 2e(3) |           |           |
| (4) Total benefit payments. Add lines 2e(1) through (3).....                         | 2e(4) |           | 194907945 |
| f Corrective distributions (see instructions) .....                                  | 2f    |           |           |
| g Certain deemed distributions of participant loans (see instructions) .....         | 2g    |           |           |
| h Interest expense .....                                                             | 2h    |           |           |
| i Administrative expenses: (1) Professional fees.....                                | 2i(1) |           |           |
| (2) Contract administrator fees.....                                                 | 2i(2) |           |           |
| (3) Investment advisory and management fees.....                                     | 2i(3) |           |           |
| (4) Other .....                                                                      | 2i(4) |           |           |
| (5) Total administrative expenses. Add lines 2i(1) through (4).....                  | 2i(5) |           | 0         |
| j Total expenses. Add all <b>expense</b> amounts in column (b) and enter total ..... | 2j    |           | 194907945 |

**Net Income and Reconciliation**

|                                                          |       |  |            |
|----------------------------------------------------------|-------|--|------------|
| k Net income (loss). Subtract line 2j from line 2d ..... | 2k    |  | -373537220 |
| l Transfers of assets:                                   |       |  |            |
| (1) To this plan.....                                    | 2l(1) |  |            |
| (2) From this plan.....                                  | 2l(2) |  |            |

**Part III Accountant's Opinion**

**3** Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

**a** The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☒ Unqualified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

**b** Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? ☐ Yes ☒ No

**c** Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: BDO USA, LLP

(2) EIN: 13-5381590

**d** The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

**Part IV Compliance Questions**

**4** CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

**a** Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....

**b** Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.) .....

|    | Yes | No | Amount |
|----|-----|----|--------|
| 4a |     | X  |        |
| 4b |     | X  |        |

|                                                                                                                                                                                                                               |           | Yes | No | Amount  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----|----|---------|
| <b>c</b> Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.) .....                                          | <b>4c</b> |     | X  |         |
| <b>d</b> Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....                                | <b>4d</b> |     | X  |         |
| <b>e</b> Was this plan covered by a fidelity bond? .....                                                                                                                                                                      | <b>4e</b> | X   |    | 1000000 |
| <b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? .....                                                                                       | <b>4f</b> |     | X  |         |
| <b>g</b> Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?.....                                                     | <b>4g</b> |     | X  |         |
| <b>h</b> Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?.....                                           | <b>4h</b> |     | X  |         |
| <b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.) .....                                                                | <b>4i</b> |     | X  |         |
| <b>j</b> Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.) ..... | <b>4j</b> |     | X  |         |
| <b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? .....                                                           | <b>4k</b> |     | X  |         |
| <b>l</b> Has the plan failed to provide any benefit when due under the plan?.....                                                                                                                                             | <b>4l</b> |     | X  |         |
| <b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) .....                                                                                                  | <b>4m</b> |     | X  |         |
| <b>n</b> If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3. ....                                      | <b>4n</b> |     |    |         |

**5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?..... ☐ Yes ☒ No  
 If "Yes," enter the amount of any plan assets that reverted to the employer this year \_\_\_\_\_.

**5b** If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

| 5b(1) Name of plan(s) | 5b(2) EIN(s) | 5b(3) PN(s) |
|-----------------------|--------------|-------------|
|                       |              |             |
|                       |              |             |
|                       |              |             |
|                       |              |             |
|                       |              |             |

**5c** If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ..... ☒ Yes ☐ No ☐ Not determined  
 If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 4168349. (See instructions.)

|                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                             |                                                                                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| <b>SCHEDULE R</b><br><b>(Form 5500)</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security Administration<br><br>Pension Benefit Guaranty Corporation | <b>Retirement Plan Information</b><br><br>This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).<br><br>▶ <b>File as an attachment to Form 5500.</b> | OMB No. 1210-0110<br><br><b>2018</b><br><br><b>This Form is Open to Public Inspection.</b> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

|                                                                                                             |                                                                    |
|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| <b>A</b> Name of plan<br><u>SCHLUMBERGER TECHNOLOGY CORPORATION PENSION PLAN</u>                            | <b>B</b> Three-digit plan number (PN) ▶<br><u>007</u>              |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500<br><u>SCHLUMBERGER TECHNOLOGY CORPORATION</u> | <b>D</b> Employer Identification Number (EIN)<br><u>22-1692661</u> |

|               |                      |
|---------------|----------------------|
| <b>Part I</b> | <b>Distributions</b> |
|---------------|----------------------|

All references to distributions relate only to payments of benefits during the plan year.

|                                                                                                                                                                                                                                                                    |          |           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------|
| <b>1</b> Total value of distributions paid in property other than in cash or the forms of property specified in the instructions .....                                                                                                                             | <b>1</b> | <u>0</u>  |
| <b>2</b> Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):<br><br>EIN(s): <u>36-1561860</u> |          |           |
| Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.                                                                                                                                                                                                   |          |           |
| <b>3</b> Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year .....                                                                                                                                   | <b>3</b> | <u>73</u> |

|                |                                                                                                                                                                               |
|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part II</b> | <b>Funding Information</b> (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.) |
|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                                                                                                                                                                                                                                             |                              |                                        |                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------------------------|-----------------------------------------|
| <b>4</b> Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? .....                                                                                                                                                                                                                                        | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> N/A            |
| If the plan is a defined benefit plan, go to line 8.                                                                                                                                                                                                                                                                                                        |                              |                                        |                                         |
| <b>5</b> If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____<br>If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule. |                              |                                        |                                         |
| <b>6 a</b> Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) .....                                                                                                                                                                                                              | <b>6a</b>                    |                                        |                                         |
| <b>b</b> Enter the amount contributed by the employer to the plan for this plan year .....                                                                                                                                                                                                                                                                  | <b>6b</b>                    |                                        |                                         |
| <b>c</b> Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) .....                                                                                                                                                                                                            | <b>6c</b>                    |                                        |                                         |
| If you completed line 6c, skip lines 8 and 9.                                                                                                                                                                                                                                                                                                               |                              |                                        |                                         |
| <b>7</b> Will the minimum funding amount reported on line 6c be met by the funding deadline? .....                                                                                                                                                                                                                                                          | <input type="checkbox"/> Yes | <input type="checkbox"/> No            | <input type="checkbox"/> N/A            |
| <b>8</b> If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? .....                                                                                 | <input type="checkbox"/> Yes | <input type="checkbox"/> No            | <input checked="" type="checkbox"/> N/A |

|                 |                   |
|-----------------|-------------------|
| <b>Part III</b> | <b>Amendments</b> |
|-----------------|-------------------|

|                                                                                                                                                                                                                             |                                   |                                   |                               |                                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------------------|-------------------------------|----------------------------------------|
| <b>9</b> If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box ..... | <input type="checkbox"/> Increase | <input type="checkbox"/> Decrease | <input type="checkbox"/> Both | <input checked="" type="checkbox"/> No |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------------------|-------------------------------|----------------------------------------|

|                |                                                                                                                                                   |
|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part IV</b> | <b>ESOPs</b> (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part. |
|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                                                                              |                              |                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
| <b>10</b> Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? .....                                                      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <b>11 a</b> Does the ESOP hold any preferred stock? .....                                                                                                                                    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <b>b</b> If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <b>12</b> Does the ESOP hold any stock that is not readily tradable on an established securities market? .....                                                                               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Schedule R (Form 5500) 2018  
v. 171027

**Part V Additional Information for Multiemployer Defined Benefit Pension Plans**

**13** Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): \_\_\_\_\_

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): \_\_\_\_\_

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): \_\_\_\_\_

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): \_\_\_\_\_

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): \_\_\_\_\_

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): \_\_\_\_\_

- 14** Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

**a** The current year .....

**b** The plan year immediately preceding the current plan year .....

**c** The second preceding plan year .....

**14a****14b****14c**

- 15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

**a** The corresponding number for the plan year immediately preceding the current plan year .....

**b** The corresponding number for the second preceding plan year .....

**15a****15b**

- 16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

**a** Enter the number of employers who withdrew during the preceding plan year .....

**b** If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers .....

**16a****16b**

- 17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. .... ☐

**Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans**

- 18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment .... ☐

- 19** If the total number of participants is 1,000 or more, complete lines (a) through (c)

- a** Enter the percentage of plan assets held as:

Stock: 49.0 % Investment-Grade Debt: 41.2 % High-Yield Debt: 3.1 % Real Estate: 3.3 % Other: 3.4 %

- b** Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☒ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

- c** What duration measure was used to calculate line 19(b)?

☒ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

# **Selected Schlumberger Pension Plans**

## **Financial Statements**

Years Ended December 31, 2018 and 2017

## **Selected Schlumberger Pension Plans**

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### **Financial Statements**

Years Ended December 31, 2018 and 2017

# **Selected Schlumberger Pension Plans**

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### **Supplemental Schedule\*:**

\*The schedules required by Section 2520.103.10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA have been omitted because they are not applicable.



## **Independent Auditor's Report**

To the Plan Administrator of the  
Selected Schlumberger Pension Plans  
Houston, Texas

We have audited the accompanying financial statements of the Schlumberger Technology Corporation Pension Plan and the Schlumberger Pension Plan for U.S. Taxpayers Employed Abroad (collectively, the "Plans"), which comprise the statements of net assets available for benefits as of December 31, 2018 and 2017, and the related statements of changes in net assets available for benefits for the years then ended and the statement of accumulated plan benefits as of December 31, 2017, and the related statement of changes in accumulated plan benefits for the year then ended, and the related notes to the financial statements.

### ***Management's Responsibility for the Financial Statements***

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

### ***Auditor's Responsibility***

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.



***Opinion***

In our opinion, the financial statements referred to above present fairly, in all material respects, information regarding the Plans' net assets available for benefits as of December 31, 2018 and 2017, and the changes therein for the years then ended, and their financial status as of December 31, 2017 and changes therein for the year then ended in accordance with accounting principles generally accepted in the United States of America.

*BDO USA, LLP*

New York, NY  
October 11, 2019

## **Financial Statements**

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# Selected Schlumberger Pension Plans

## Statements of Net Assets Available for Benefits

| <b>December 31, 2018</b>                               | <b>EIN/Plan No:</b> | <b>Schlumberger<br/>Technology<br/>Corporation<br/>Pension Plan<br/>22-1692661/007</b> | <b>Schlumberger<br/>Pension Plan for<br/>U.S. Taxpayers<br/>Employed Abroad<br/>22-1692661/011</b> |
|--------------------------------------------------------|---------------------|----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| <b>Assets</b>                                          |                     |                                                                                        |                                                                                                    |
| Investments, at fair value:                            |                     |                                                                                        |                                                                                                    |
| Plan interest in the Schlumberger Master Pension Trust |                     | \$ 3,717,697,320                                                                       | \$ 240,829,280                                                                                     |
| Net assets held in 401(h) account                      |                     | 305,143,629                                                                            | -                                                                                                  |
| <b>Total assets</b>                                    |                     | <b>4,022,840,949</b>                                                                   | <b>240,829,280</b>                                                                                 |
| <b>Liabilities</b>                                     |                     |                                                                                        |                                                                                                    |
| Accrued administrative expenses                        |                     | 1,812,808                                                                              | 161,783                                                                                            |
| Amounts related to obligation of 401(h) account        |                     | 305,143,629                                                                            | -                                                                                                  |
| <b>Total liabilities</b>                               |                     | <b>306,956,437</b>                                                                     | <b>161,783</b>                                                                                     |
| <b>Net assets available for benefits</b>               |                     | <b>\$ 3,715,884,512</b>                                                                | <b>\$ 240,667,497</b>                                                                              |

*See accompanying notes to financial statements.*

# Selected Schlumberger Pension Plans

## Statements of Net Assets Available for Benefits

| <b>December 31, 2017</b>                               | <b>EIN/Plan No:</b> | <b>Schlumberger<br/>Technology<br/>Corporation<br/>Pension Plan<br/>22-1692661/007</b> | <b>Schlumberger<br/>Pension Plan for<br/>U.S. Taxpayers<br/>Employed Abroad<br/>22-1692661/011</b> |
|--------------------------------------------------------|---------------------|----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| <b>Assets</b>                                          |                     |                                                                                        |                                                                                                    |
| Investments, at fair value:                            |                     |                                                                                        |                                                                                                    |
| Plan interest in the Schlumberger Master Pension Trust |                     | \$ 4,023,979,368                                                                       | \$ 250,614,985                                                                                     |
| Net assets held in 401(h) account                      |                     | 373,970,110                                                                            | -                                                                                                  |
| <b>Total assets</b>                                    |                     | 4,397,949,478                                                                          | 250,614,985                                                                                        |
| <b>Liabilities</b>                                     |                     |                                                                                        |                                                                                                    |
| Accrued administrative expenses                        |                     | 3,384,117                                                                              | 244,708                                                                                            |
| Amounts related to obligation of 401(h) account        |                     | 373,970,110                                                                            | -                                                                                                  |
| <b>Total liabilities</b>                               |                     | 377,354,227                                                                            | 244,708                                                                                            |
| <b>Net assets available for benefits</b>               |                     | \$ 4,020,595,251                                                                       | \$ 250,370,277                                                                                     |

*See accompanying notes to financial statements.*

## Selected Schlumberger Pension Plans

### Statements of Changes in Net Assets Available for Benefits

| <b>Year ended December 31, 2018</b>                                       | <b>EIN/Plan No:</b> | <b>Schlumberger<br/>Technology<br/>Corporation<br/>Pension Plan<br/>22-1692661/007</b> | <b>Schlumberger<br/>Pension Plan for<br/>U.S. Taxpayers<br/>Employed Abroad<br/>22-1692661/011</b> |
|---------------------------------------------------------------------------|---------------------|----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| <b>Additions (reductions):</b>                                            |                     |                                                                                        |                                                                                                    |
| Contributions:                                                            |                     |                                                                                        |                                                                                                    |
| Employer                                                                  |                     | \$ -                                                                                   | \$ -                                                                                               |
| Participants                                                              |                     | -                                                                                      | 1,929,941                                                                                          |
| Total contributions                                                       |                     | -                                                                                      | 1,929,941                                                                                          |
| Plan interest in the Schlumberger Master Pension Trust<br>investment loss |                     | (96,842,244)                                                                           | (6,030,811)                                                                                        |
| <b>Total reductions</b>                                                   |                     | <b>(96,842,244)</b>                                                                    | <b>(4,100,870)</b>                                                                                 |
| <b>Deductions:</b>                                                        |                     |                                                                                        |                                                                                                    |
| Benefits paid to participants                                             |                     | 194,907,945                                                                            | 4,873,125                                                                                          |
| Administrative expenses                                                   |                     | 12,960,550                                                                             | 728,785                                                                                            |
| <b>Total deductions</b>                                                   |                     | <b>207,868,495</b>                                                                     | <b>5,601,910</b>                                                                                   |
| Net decrease                                                              |                     | (304,710,739)                                                                          | (9,702,780)                                                                                        |
| <b>Net assets available for benefits, beginning of year</b>               |                     | <b>4,020,595,251</b>                                                                   | <b>250,370,277</b>                                                                                 |
| <b>Net assets available for benefits, end of year</b>                     |                     | <b>\$ 3,715,884,512</b>                                                                | <b>\$ 240,667,497</b>                                                                              |

*See accompanying notes to financial statements.*

## Selected Schlumberger Pension Plans

### Statements of Changes in Net Assets Available for Benefits

| <i>Year ended December 31, 2017</i>                                         | EIN/Plan No: | Schlumberger<br>Technology<br>Corporation<br>Pension Plan<br>22-1692661/007 | Schlumberger<br>Pension Plan for<br>U.S. Taxpayers<br>Employed Abroad<br>22-1692661/011 |
|-----------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| <b>Additions:</b>                                                           |              |                                                                             |                                                                                         |
| Contributions:                                                              |              |                                                                             |                                                                                         |
| Employer                                                                    |              | \$ -                                                                        | \$ -                                                                                    |
| Participants                                                                |              | -                                                                           | 2,262,107                                                                               |
| Total contributions                                                         |              | -                                                                           | 2,262,107                                                                               |
| Plan interest in the Schlumberger Master Pension Trust<br>investment income |              | 635,786,686                                                                 | 38,565,961                                                                              |
| <b>Total additions</b>                                                      |              | 635,786,686                                                                 | 40,828,068                                                                              |
| <b>Deductions:</b>                                                          |              |                                                                             |                                                                                         |
| Benefits paid to participants                                               |              | 187,191,016                                                                 | 4,273,370                                                                               |
| Administrative expenses                                                     |              | 18,426,326                                                                  | 765,437                                                                                 |
| <b>Total deductions</b>                                                     |              | 205,617,342                                                                 | 5,038,807                                                                               |
| Net increase                                                                |              | 430,169,344                                                                 | 35,789,261                                                                              |
| Transfer of assets from affiliated plan                                     |              | 164,003                                                                     | -                                                                                       |
| <b>Net assets available for benefits, beginning of year</b>                 |              | 3,590,261,904                                                               | 214,581,016                                                                             |
| <b>Net assets available for benefits, end of year</b>                       |              | \$ 4,020,595,251                                                            | \$ 250,370,277                                                                          |

*See accompanying notes to financial statements.*

## Selected Schlumberger Pension Plans

### Statements of Accumulated Plan Benefits

|                                                                                          | Schlumberger<br>Technology<br>Corporation<br>Pension Plan | Schlumberger<br>Pension Plan for<br>U.S. Taxpayers<br>Employed Abroad |
|------------------------------------------------------------------------------------------|-----------------------------------------------------------|-----------------------------------------------------------------------|
| <b>December 31, 2017</b>                                                                 | EIN/Plan No: 22-1692661/007                               | 22-1692661/011                                                        |
| <b>Actuarial present value of accumulated plan benefits:</b>                             |                                                           |                                                                       |
| Vested benefits:                                                                         |                                                           |                                                                       |
| Participants currently receiving benefits                                                | \$ 1,949,086,923                                          | \$ 51,499,468                                                         |
| Accumulated employer contributions with interest for<br>active and inactive participants | -                                                         | 29,397,455                                                            |
| Other vested benefits                                                                    | 802,117,180                                               | 57,673,290                                                            |
| Total vested benefits                                                                    | 2,751,204,103                                             | 138,570,213                                                           |
| Nonvested benefits                                                                       | 36,437,186                                                | 2,962,725                                                             |
| <b>Total actuarial present value of accumulated plan benefits</b>                        | <b>\$ 2,787,641,289</b>                                   | <b>\$ 141,532,938</b>                                                 |

*See accompanying notes to financial statements.*

# Selected Schlumberger Pension Plans

## Statements of Changes in Accumulated Plan Benefits

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|                                                                                            | Schlumberger<br>Technology<br>Corporation<br>Pension Plan | Schlumberger<br>Pension Plan for<br>U.S. Taxpayers<br>Employed Abroad |
|--------------------------------------------------------------------------------------------|-----------------------------------------------------------|-----------------------------------------------------------------------|
| <i>Year ended December 31, 2017</i>                                                        | EIN/Plan No: 22-1692661/007                               | 22-1692661/011                                                        |
| <b>Actuarial present value of accumulated plan benefits<br/>at December 31, 2016</b>       | <b>\$ 2,728,356,558</b>                                   | <b>\$ 129,674,014</b>                                                 |
| Increase (decrease) during the year attributable to:                                       |                                                           |                                                                       |
| Interest due to the decrease in the discount period                                        | 197,805,850                                               | 9,725,551                                                             |
| Changes in actuarial assumptions                                                           | (4,005,472)                                               | (165,952)                                                             |
| Benefits accumulated and actuarial experience                                              | 52,690,124                                                | 6,572,695                                                             |
| Benefits paid                                                                              | (187,205,771)                                             | (4,273,370)                                                           |
| <b>Total vested benefits</b>                                                               | <b>59,284,731</b>                                         | <b>11,858,924</b>                                                     |
| <b>Total actuarial present value of accumulated plan benefits<br/>at December 31, 2017</b> | <b>\$ 2,787,641,289</b>                                   | <b>\$ 141,532,938</b>                                                 |

*See accompanying notes to financial statements.*

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

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### 1. Description of the Plans

The following brief descriptions of the Schlumberger Technology Corporation Pension Plan and the Schlumberger Pension Plan for U.S. Taxpayers Employed Abroad (collectively, the “Plans”) are provided for general information purposes only. Participants should refer to the applicable Plan document for more complete information.

#### **General**

The Schlumberger Technology Corporation Pension Plan (the “Technology Plan”) is a defined benefit pension plan covering employees of Schlumberger Technology Corporation (the “Corporation”), who have met certain requirements, including length of service.

The Schlumberger Pension Plan for U.S. Taxpayers Employed Abroad (the “U.S. Abroad Plan”) is a defined benefit pension plan established on January 1, 2009, covering employees (U.S. citizens and/or U.S. taxpayers employed abroad) of Schlumberger Limited (the “Company”) who have met certain requirements, including length of service.

The Plans are subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (“ERISA”). The Plans have an allocable interest in the net assets of the Schlumberger Master Pension Trust (the “Pension Trust”), a master trust arrangement which serves as the investing medium for the Plans and a certain other plan of the Company and its affiliates.

The Plans are administered by an Administrative Committee, which is appointed by the Board of Directors of the Company. The Administrative Committee is responsible for general administration of the Plans.

The Finance Committee is appointed by the Board of Directors of the Company. The Finance Committee communicates to The Northern Trust Company (the “Trustee”) the funding policies and methods which have been established to carry out the objectives of the Plans.

Effective December 31, 2016, the Smith International, Inc. Restated Pension Plan (the “Smith Plan”) and the Greybull Pension Plan (the “Greybull Plan”) merged with and into the Technology Plan. As a result of these mergers, \$164,003 was transferred into the Technology Plan in 2017.

All benefits accrued under the Smith Plan and the Greybull Plan were incorporated into the Technology Plan for use solely with respect to the funds transferred from the Smith Plan and the Greybull Plan to the extent required by law.

#### **Eligibility**

Employees of the Corporation hired on and after October 1, 2004 are not eligible to participate in the Technology Plan. Employees hired prior to October 1, 2004 were eligible to participate in the Technology Plan on the first day of the month following the completion of one year of eligible service (i.e., 1,000 hours in twelve consecutive months). Such employees had a one-time opportunity to cease participation in the Technology Plan as of January 1, 2005 and to receive an enhanced benefit under the Schlumberger Technology Corporation Savings and Profit Sharing Plan. Benefit accruals under the Technology Plan were frozen as of January 1, 2005 for participants who elected to cease participation in the Technology Plan.

Each employee of the Company who (a) is designated as an International Mobile employee, an International Commuter employee, a Europe Mobile employee or a GeoMobile employee who was a participant in the Schlumberger International Staff Pension Plan immediately prior to January 1, 2009, (b) is a U.S. taxpayer working outside of the U.S., and (c) has completed one year of continuous active employment shall be eligible to commence participation in the U.S. Abroad Plan on the first day of the

# **Selected Schlumberger Pension Plans**

## **Notes to Financial Statements**

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next following month. An employee who was a participant in the Schlumberger International Staff Pension Plan prior to January 1, 2009, and who completes one hour of service on or after such date, shall be eligible to participate in the U.S. Abroad Plan as of January 1, 2009. Employees hired after January 1, 2009 are eligible to participate in the U.S. Abroad Plan as of the date the employee completes one year of active service, as defined in the U.S. Abroad Plan document. Notwithstanding the foregoing, in order to be eligible to become a participant, each employee must agree to make participant contributions in accordance with the written procedures of the U.S. Abroad Plan.

Effective October 1, 2014, the U.S. Abroad Plan was amended to exclude any new participants from participation in the U.S. Abroad Plan. This amendment did not have an effect on the actuarial present value of accumulated benefits of the U.S. Abroad Plan.

### ***Vesting***

Effective January 1, 2009, a Technology Plan participant is 100% vested at the attainment of age 50 or completion of five years of active service, whichever occurs first. Prior to January 1, 2009, a Technology Plan participant was 100% vested at the attainment of age 55 or completion of five years of active service, whichever occurred first.

A U.S. Abroad Plan participant is 100% vested in his accrued benefits attributable to Company contributions to the U.S. Abroad Plan after five years of active service or attainment of age 50, whichever occurs first. A U.S. Abroad Plan participant is 100% vested in his accrued benefits attributable to his contribution to the U.S. Abroad Plan.

### ***Retirement Age***

Normal retirement age is 65. Under the Technology Plan, early retirement is permitted at age 55 and special early retirement is permitted at age 50, provided the participant has completed at least 20 years of active service. Under the U.S. Abroad Plan, early retirement is permitted at age 55 for benefits accrued in 2009 and age 60 for benefits accrued after 2009. Under the U.S. Abroad Plan, special early retirement is permitted at age 55 for benefits accrued after 2009, and age 50 for benefits accrued in 2009, provided the participant has completed at least 20 years of active service.

### ***Funding Policy***

Employer contributions are determined by an independent actuary, Sibson Consulting, and represent the annual amount required by ERISA to meet the minimum funding standards. These contributions are funded on or before the required dates as set forth by ERISA. The Plans met the ERISA minimum funding requirement for 2018 and 2017. The Corporation or the Company at its option can contribute more than the minimum required. Employee contributions are not permitted under the Technology Plan. With respect to the U.S. Abroad Plan, active participants are required to contribute 6% of their admissible compensation as defined in the U.S. Abroad Plan document, for each calendar year or portion thereof by automatic payroll deduction. Upon termination of employment prior to becoming vested, participant contributions, together with appropriate accumulated interest at a 6% rate, are refunded.

### ***Benefits***

Participants who are vested and whose benefits commence at or after normal, early or special early retirement age are entitled to receive pension benefits for their lifetime in annual amounts equal to the sum of their annual retirement credits as of their retirement date reduced for early commencement, as defined in the applicable Plan document.

# **Selected Schlumberger Pension Plans**

## **Notes to Financial Statements**

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Technology Plan participants accrue an annual retirement credit for each year (or portion thereof) of participation in the Technology Plan equal to 1.5% of their admissible compensation, as defined in the Technology Plan document, for up to 15 years of active service and 2% for years in excess of 15.

U.S. Abroad Plan participants accrue an annual retirement credit for each year (or portion thereof) of participation in the U.S. Abroad Plan equal to 3.2% of their admissible compensation for the Plan year 2009. For each year of service after December 31, 2009, a participant shall accrue an annual retirement credit equal to 3.5% of admissible compensation.

The maximum annual benefit payable to a participant shall not exceed the lesser of \$220,000 and \$215,000 in 2018 and 2017, respectively, or 100% of the participant's average annual compensation for the three consecutive calendar years with the greatest aggregate compensation. The maximum admissible compensation shall not exceed \$275,000 and \$270,000 in 2018 and 2017, respectively. In addition, survivor benefits may be paid to a deceased participant's surviving spouse or to a designated beneficiary under certain retirement options.

Alternative benefit options are available, as outlined in the applicable Plan document.

## **2. Summary of Significant Accounting Policies**

### ***Basis of Accounting***

The accompanying financial statements of the Plans are prepared under the accrual basis of accounting.

### ***Use of Estimates***

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities and changes therein and disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements. Accordingly, actual results could differ from those estimates.

### ***Valuation of Investments and Income Recognition***

The Plans' interest in the Pension Trust and net assets held in the 401(h) account are stated at fair value, and consists of an allocation of the Pension Trust's net assets that is based upon cumulative employer contributions, net of benefits paid to terminated and retired participants, and allocations of the Pension Trust's investment income and administrative expenses.

The Plans follow the provisions of Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820, "Fair Value Measurement." Under ASC 820, fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (i.e., the exit price). The Director of Trust Investments determines the Plans' valuation policies utilizing information provided by the investment managers and the Trustee.

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under ASC 820 are as described as follows:

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

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Level 1: Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plans have the ability to access.

Level 2: Inputs to the valuation methodology include:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability;
- inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3: Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of relevant observable inputs and minimize the use of unobservable inputs. Observable inputs are inputs that reflect the assumptions market participants would use in pricing the asset or liability developed based on market data obtained from sources independent of the Plans. Unobservable inputs are inputs that reflect the Plans' own assumptions about the assumptions market participants would use in pricing the asset or liability developed based on the best information available in the circumstances.

Changes in economic conditions or valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period. Plan management evaluated the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits. There were no significant transfers in or out of levels 1, 2 or 3 for the years ended December 31, 2018 and 2017. See Notes 6 and 7 for the disclosures required by ASC 820 with regard to Plan investments.

A fair value measurement is for a particular asset or liability. The unit of account determines what is being measured by reference to the level at which the asset or liability is aggregated (or disaggregated) for purposes of applying other accounting pronouncements. Accordingly, because the Plans do not hold shares of the Pension Trust, the disclosures required by ASC 820 are required for the individual assets and liabilities under the Pension Trust and are not required for the Plans' total interest in the Pension Trust. Similarly, since the Pension Trust does not hold shares of the Schlumberger Group Trust (the "Group Trust"), the disclosures required by ASC 820 are required for the individual assets and liabilities under the Group Trust and are not required for the Pension Trust's total interest in the Group Trust. Likewise, since the Group Trust does not own shares of the different investment pools which are disclosed in Note 7, the disclosures required by ASC 820 are required for the individual assets and liabilities under each investment pool and are not required for the Group Trust's total interest in each of the investment pools.

In the same context, the disclosures required by ASC 820 are required for the individual assets and liabilities underlying the net assets held in the 401(h) account that are measured at fair value and are not required for the net assets held in the 401(h) account itself or the amounts related to the obligation of 401(h) account. Since all of the net assets held in the 401(h) account consist of the interest in the Pension Trust, the disclosures required by ASC 820 for the individual assets and liabilities under the Pension Trust are adequate (see Note 6).

# **Selected Schlumberger Pension Plans**

## **Notes to Financial Statements**

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In determining the fair value of assets and liabilities underlying the Pension Trust, Group Trust and the investment pools owned by the Group Trust, the Pension Trust and Group Trust use various inputs and valuation methodologies which are described in Notes 6 and 7. There have been no significant changes in the inputs or valuation methodologies used at December 31, 2018 and 2017.

Investment income relating to the Pension Trust is allocated to the respective Plan based upon the average monthly balance invested by each Plan.

### ***Benefit Payments***

Benefits are recorded when paid.

### ***Administrative Expenses***

The Plans' expenses are paid either by the Plans or the Corporation or the Company, as provided by the applicable Plan document. Expenses that are paid directly by the Corporation or the Company are excluded from these financial statements. Expenses incurred in connection with the general administration of the Plans that are paid by the respective Plan are recorded as deductions in the accompanying statements of changes in net assets available for benefits. Certain administrative expenses relating to the Pension Trust are allocated to the Plans based upon the average monthly balance invested by each Plan. Other administrative expenses are allocated to the Plans based on the specific services provided to each Plan.

### ***Relevant Accounting Developments***

In February 2017, the FASB issued Accounting Standards Update ("ASU") No. 2017-06. ASU 2017-06 requires an employee benefit plan within the scope of Topics 960, 962, or 965 to present its interest in a master trust and the change in its interest in the master trust as single line items in the statement of net assets available for benefits and the statement of changes in net assets available for benefits, respectively. In addition, the amendments update and align the disclosure requirements for an interest in a master trust across Topics 960, 962, or 965. The amendments are effective for fiscal years beginning after December 15, 2018. Early adoption is permitted. Plan management is currently evaluating the impact of the adoption of ASU No. 2017-06 on the Plans' financial statements.

In September 2018, the FASB issued ASU No. 2018-13, Fair Value Measurement (Topic 820): Disclosure Framework - Changes to the Disclosure Requirements for Fair Value Measurement. ASU 2018-13 amends the disclosure requirements for recurring and nonrecurring fair value measurements by removing, modifying and adding certain disclosures. ASU 2018-13 removes the following disclosures: the amount of and reasons for transfers between Level 1 and Level 2 of the fair value hierarchy; the policy for timing of transfers; the valuation process for Level 3 fair value measurements; and changes in the unrealized gains and losses for the period included in earnings for recurring Level 3 fair value measurements held at the end of the reporting period. The ASU modifies the following disclosure requirements: transfers in and out of Level 3 and purchases and issues of Level 3 assets and liabilities; for investments in certain entities that calculate net asset value, the timing of liquidation of an investee's assets and the date when restrictions from redemption might lapse if timing has been communicated or announced publicly; and clarifies that the measurement uncertainty disclosure is to communicate information about the uncertainty in measurement as of the reporting date. The additional disclosures required under ASU 2018-13 are applicable only for public entities. The ASU is effective for fiscal years beginning after December 15, 2019, with early adoption permitted. Certain amendments of the ASU may be applied prospectively while others should be applied retrospectively to all periods presented upon the effective date. It is permissible to early adopt any removed or modified disclosures and delay adoption of the additional disclosures, if applicable, until the effective date. Plan management is currently evaluating the impact that the ASU will have on the plan financial statements.

# **Selected Schlumberger Pension Plans**

## **Notes to Financial Statements**

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### **3. Risks and Uncertainties**

Due to various risks (i.e., interest rate, market and credit risk) associated with certain investments of the Pension Trust and Group Trust, and the level of uncertainty related to changes in the value of investments, it is at least reasonably possible that changes in the values of the investments of the Pension Trust and Group Trust will occur in the near term, and this could materially affect the value of the Plans' interest in the Pension Trust and the corresponding investment income reported in the statements of net assets available for benefits and the statements of changes in net assets available for benefits, respectively.

The Pension Trust and Group Trust invest in securities with contractual cash flows, such as asset-backed securities, collateralized mortgage obligations and commercial mortgage-backed securities. The value, liquidity and related income of these securities are sensitive to changes in economic conditions, including real estate value, delinquencies or defaults, or both, and may be adversely affected by shifts in the market's perception of the issuers and changes in interest rates.

Plan contributions are made, and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term could materially affect the amounts reported in the financial statements.

### **4. Plan Termination**

The Board of Directors of the Company reserves the right to terminate either Plan entirely or partially at any time. In the event of the termination of either Plan, the rights of all affected employees to benefits accrued to the date of such termination to the extent then funded shall become fully vested and nonforfeitable, and the net assets of that Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide benefits in accordance with the following priorities:

- a) Benefits that a participant has been receiving for at least three years before the date of termination (or would have been receiving if he or she had retired three years before the date of termination) based on the provisions of that Plan (as in effect during the five-year period ending on such date) under which such benefit would be the least.
- b) Benefits to each participant representing the present value of benefits guaranteed under Title IV of ERISA.
- c) Benefits to each participant representing the present value of his or her nonforfeitable benefits.
- d) Benefits to each participant representing the present value of his or her accrued benefit.

After satisfaction of all liabilities of that Plan for benefits or otherwise, any residual assets remaining in the Pension Trust shall, unless otherwise required by ERISA, revert to the Corporation or the Company.

Generally, the Pension Benefit Guaranty Corporation (the "PBGC") guarantees the payment of most vested normal retirement benefits, early retirement benefits, and certain disability and survivor benefits and survivor pensions, subject to certain limitations. Should either Plan terminate at some future time, its net assets generally will not be available on a pro rata basis to provide participants' benefits. Whether a particular participant's accumulated plan benefits will be paid depends on both the priority of those benefits and the level of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided for by the then existing assets and the PBGC guaranty while other benefits may not be provided for at all. Participants should consult the applicable Plan document for more complete information related to guarantees of benefits.

# **Selected Schlumberger Pension Plans**

## **Notes to Financial Statements**

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The PBGC guarantees vested benefits at the level in effect on the date of either Plan termination. However, if benefits have been increased within the 5 years before either Plan termination, the whole amount of that Plan's vested benefits or the benefit increase may not be guaranteed. In addition, there is a ceiling on the amount of monthly benefits that PBGC guarantees, which is adjusted periodically.

Whether all participants receive their benefits should either Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the Corporation or the Company and the level of benefits guaranteed by the PBGC.

In the event of a Plan's withdrawal from the Pension Trust, the Trustee shall set apart that portion or equitable share of the Pension Trust allocated to that Plan pursuant to a valuation and allocation of the Pension Trust by the Trustee, subject to approval by the Finance Committee.

### **5. Actuarial Present Value of Accumulated Plan Benefits**

Accumulated plan benefits are those future periodic benefit payments, including lump-sum distributions, which are attributable under the applicable Plan provisions to the service employees have rendered to the benefit information date. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries.

Benefits under the Plans are accumulated based on employees' compensation during each year of credited service. The accumulated plan benefits for active employees will equal the accumulation, with interest, of the annual benefit accruals as of the benefit information date. Benefits payable under all circumstances—retirement, death, disability, and termination of employment—are included, to the extent they are deemed attributable to employee service rendered to the valuation date. Benefits to be provided via annuity contracts excluded from the applicable Plan assets are excluded from accumulated plan benefits.

The actuarial present value of accumulated plan benefits, which is determined by an independent actuary, is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits earned by the participants to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as death, withdrawal or retirement) between the benefit information date and the expected date of payment.

The calculation of the actuarial present value of accumulated plan benefits as of December 31, 2017 has been based on the following significant actuarial assumptions:

- a) Expected rate of return on investments (including a reduction of 0.5% to reflect anticipated administrative expenses associated with providing benefits):
  - Technology Plan: 7.25%
  - U.S. Abroad Plan: 7.50%
- b) Mortality: Total Collar RP-2014 table employee and annuitant mortality tables (adjusted back to 2006 using scale MP-2014) , projected forward using the Intermediate Tier Assumptions of the SSA's 2017 Trustees Report for 2017 and the SSA's 2016 Trustees Report for 2016.

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

### c) Retirement rates:

| Technology Plan* |      |     |      | U.S. Abroad Plan |      |
|------------------|------|-----|------|------------------|------|
| Age              | Rate | Age | Rate | Age              | Rate |
| 55-58            | 7%   | 62  | 25%  | 50-54            | 0%   |
| 59               | 9%   | 63  | 20%  | 55-59            | 25%  |
| 60               | 12%  | 64  | 20%  | 60-64            | 40%  |
| 61               | 12%  | 65  | 100% | 65               | 100% |

*\*For former Smith and Greybull Plan participants currently in the Technology Plan, 100% retirement is assumed at 62.*

### d) Termination rates before retirement:

| Technology Plan* |        |     |       | U.S. Abroad Plan |        |     |        |
|------------------|--------|-----|-------|------------------|--------|-----|--------|
| Age              | Rate   | Age | Rate  | Age              | Rate   | Age | Rate   |
| 20               | 16.67% | 45  | 4.50% | 25               | 12.60% | 45  | 8.40%  |
| 25               | 16.67% | 50  | 2.17% | 30               | 10.30% | 50  | 11.37% |
| 30               | 13.00% | 55  | 0.00% | 35               | 8.80%  | 54  | 13.20% |
| 35               | 9.83%  | 60  | 0.00% | 40               | 8.25%  | 55+ | 0.00%  |
| 40               | 7.00%  |     |       |                  |        |     |        |

*\*For former Smith and Greybull Plan participants currently in the Technology Plan, no pre-retirement termination is assumed.*

### e) Retirement from terminated vested status:

- Technology Plan: Age 65
- U.S. Abroad Plan: Age 60, with appropriate reduction

The actuarial cost method used is the Projected Unit Credit for both funding and the calculation of the actuarial present value of accumulated plan benefits.

The foregoing actuarial assumptions are based on the presumption that a Plan will continue. Were a Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

The computations of the actuarial present value of accumulated plan benefits were made as of January 1, 2018 and 2017. Had the valuations been performed as of December 31, there would be no material differences.

The Plans are not considered "at-risk" for the 2018 Plan year.

In October 2017, the Internal Revenue Service updated the mortality tables to be used for both ERISA funding and lump sum benefits beginning in the 2018 calendar year. In addition, it also updated the static mortality tables for plan years beginning during 2017 with respect to valuation dates occurring during 2018. These changes could potentially impact lump sum benefits, funding costs and balance sheet obligations, except in situations where the projected lump sum mortality rates were already considered. Plan management is currently evaluating the impact to the Plan.

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

### 6. Interest in the Schlumberger Master Pension Trust

The Plans investments are 100% in the Pension Trust. The Pension Trust was established for the investment of assets of the Plans sponsored by Schlumberger Limited and its affiliates (collectively, the "Pension Plans"). Each participating plan has an allocable interest in the Pension Trust. The assets of the Pension Trust are held by the Trustee. At December 31, 2018 and 2017, the Plans' interest in the net assets, net of receivables and accrued expenses of the individual Plans, of the Pension Trust was as follows:

| <b>December 31,</b>              | <b>2018</b>                        | <b>2017</b>                 |
|----------------------------------|------------------------------------|-----------------------------|
| Technology Plan                  | <b>87.19% ( \$ 3.716 billion)</b>  | 86.56% ( \$ 4.021 billion)  |
| Technology Plan (401(h) account) | <b>7.16% ( \$ 305.144 million)</b> | 8.05% ( \$ 373.970 million) |
| U.S. Abroad Plan                 | <b>5.65% ( \$ 240.667 million)</b> | 5.39% ( \$ 250.370 million) |

Investment income and certain administrative expenses relating to the Pension Trust are allocated to the individual Plans based upon average monthly balances invested by each Plan. Other administrative expenses are allocated to each plan based on the specific services provided to them. The Plans' balances reflect transfers to and from the individual Plans as well as the Plans' share of investment income. In addition, any commitments of the Pension Trust are shared by the individual plans based on the participating plan's allocable interest.

The following table presents the net assets of the Pension Trust:

| <b>December 31,</b>                                    | <b>2018</b>           | <b>2017</b>  |
|--------------------------------------------------------|-----------------------|--------------|
|                                                        | <i>(in thousands)</i> |              |
| <b>Assets</b>                                          |                       |              |
| Investments, at fair value:                            |                       |              |
| Pension Trust interest in the Schlumberger Group Trust | <b>\$ 4,031,223</b>   | \$ 4,415,802 |
| Short-term investment funds                            | <b>27,907</b>         | 25,000       |
| Real estate                                            | -                     | 2            |
| Limited partnerships                                   | <b>195,759</b>        | 193,519      |
| Collective trust                                       | <b>9,536</b>          | 16,134       |
| Total investment, at fair value                        | <b>4,264,425</b>      | 4,650,457    |
| Accrued income and other assets                        | <b>21</b>             | -            |
| <b>Total assets</b>                                    | <b>4,264,446</b>      | 4,650,457    |
| <b>Liabilities</b>                                     |                       |              |
| Due to broker for securities purchased                 | <b>776</b>            | 1,884        |
| Other liabilities                                      | -                     | 9            |
| <b>Total liabilities</b>                               | <b>776</b>            | 1,893        |
| <b>Net assets</b>                                      | <b>\$ 4,263,670</b>   | \$ 4,648,564 |

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

The following table presents investment income of the Pension Trust:

| <b>Years Ended December 31,</b>                               | <b>2018</b>         | <b>2017</b>       |
|---------------------------------------------------------------|---------------------|-------------------|
| <i>(in thousands)</i>                                         |                     |                   |
| <b>Investment (loss) income:</b>                              |                     |                   |
| Pension Trust interest in the Schlumberger Group Trust income | \$ (149,705)        | \$ 706,827        |
| Net appreciation in fair value of investments:                |                     |                   |
| Real estate                                                   | -                   | 2,503             |
| Limited partnerships                                          | 31,101              | 25,992            |
| Net appreciation in fair value of investments                 | 31,101              | 28,495            |
| Interest and other income                                     | 315                 | 1,872             |
| <b>Total investment (loss) income</b>                         | <b>\$ (118,289)</b> | <b>\$ 737,194</b> |

The following tables set forth by level, within the fair value hierarchy discussed in Note 2, the Pension Trust's net assets at fair value as of December 31, 2018 and 2017. The following tables do not include the Pension Trust's interest in the Group Trust because that information is presented in a separate table (see Note 7):

| <b>Net Assets at Fair Value as of December 31, 2018</b>                  | <b>Level 1</b> | <b>Total</b>   |
|--------------------------------------------------------------------------|----------------|----------------|
| <i>(in thousands)</i>                                                    |                |                |
| Short-term investment funds                                              | \$ 27,907      | \$ 27,907      |
| <b>Total investment assets in the fair value hierarchy</b>               | <b>27,907</b>  | <b>27,907</b>  |
| Other investments, measured at net asset value (a):                      |                |                |
| Limited partnerships                                                     |                | 195,759        |
| Collective trust                                                         |                | 9,536          |
| Total other investments, measured at net asset value                     |                | 205,295        |
| <b>Total investments, at fair value</b>                                  |                | <b>233,202</b> |
| <b>Accrued income and other assets</b>                                   |                | <b>21</b>      |
| <b>Total assets</b>                                                      |                | <b>233,223</b> |
| <b>Liabilities</b>                                                       |                |                |
| Due to broker for securities purchased                                   |                | 776            |
| <b>Total liabilities</b>                                                 |                | <b>776</b>     |
| <b>Total net assets, excluding Pension Trust interest in Group Trust</b> | <b>\$</b>      | <b>232,447</b> |

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

| Net Assets at Fair Value as of December 31, 2017                         | Level 1   | Total     |
|--------------------------------------------------------------------------|-----------|-----------|
| <i>(in thousands)</i>                                                    |           |           |
| Short-term investment funds                                              | \$ 25,000 | \$ 25,000 |
| <b>Total investment assets in the fair value hierarchy</b>               | 25,000    | 25,000    |
| Other investments, measured at net asset value (a):                      |           |           |
| Real estate                                                              |           | 2         |
| Limited partnerships                                                     |           | 193,519   |
| Collective trust                                                         |           | 16,134    |
| Total other investments, measured at net asset value                     |           | 209,655   |
| <b>Total investments, at fair value</b>                                  |           | 234,655   |
| <b>Total assets</b>                                                      |           | 234,655   |
| <b>Liabilities</b>                                                       |           |           |
| Due to broker for securities purchased                                   |           | 1,884     |
| Other liabilities                                                        |           | 9         |
| <b>Total liabilities</b>                                                 |           | 1,893     |
| <b>Total net assets, excluding Pension Trust interest in Group Trust</b> | \$        | 232,762   |

(a) Certain investments that are measured at fair value using the net asset value per share (or its equivalent) as a practical expedient have not been categorized in the fair value hierarchy. The fair value amounts presented in these tables are intended to and permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits of the Master Pension Trust.

### Valuation of Investments and Financial Liabilities

The Pension Trust interest in the Group Trust is stated at fair value and consists of an allocation of the Group Trust's net assets that is based on amounts contributed by the Pension Trust and a certain other trust and plan of Schlumberger Limited and its affiliates, net of distributions, that are invested by the Group Trust, and a respective allocation of investment income and administrative expenses.

Short-term investment funds are stated using a constant price (or amortized cost) of \$1 per unit of participation, which approximates fair value.

Investments in real estate are made principally through pooled separate accounts and real estate investment trusts ("REIT"), which are stated at fair value represented by the net asset value of the pooled separate account or REIT at year-end, as determined by the investment manager based on the fair value of the underlying real estate investments. The fair value of the underlying real estate investments are valued by independent appraisers on an annual basis. However, because of the inherent uncertainty of the valuation, the valuation presented does not necessarily represent the amount that might ultimately be realized from the investment held. The investments in real estate were purchased for the sole benefit of the Pension Plans. Net asset value is used as a practical expedient for measuring fair value.

Investments in limited partnerships are stated at fair value represented by the net asset value of the partnership interests owned by the Pension Trust at year-end, as determined by the respective general partners of the limited partnerships based on the fair value of the underlying investments of the limited partnerships. In establishing the fair value of partnership investments, general partners take into consideration information from the financial statements of the companies in which they invest, as well

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

as the currency in which the investment is denominated. Because of the inherent uncertainty of the valuation, the valuation presented does not necessarily represent the amount that might ultimately be realized from the investment held. The investments in limited partnerships were purchased for the sole benefit of the Pension Plans.

The investment in the collective trust is stated at the net asset value of the units of participation owned at year end as determined by the trustee of the collective trust based on the fair value of the underlying investments of the collective trust. The net asset value is used as a practical expedient for measuring fair value.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Pension Trust believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table sets forth a summary of investments held by the Pension Trust reported at net asset value as of December 31, 2018 and 2017:

|                                     | Fair Value            |                   | Unfunded<br>Commitments<br>at December<br>31, 2018 | Redemption<br>Frequency<br>(if Currently<br>Eligible) | Redemption<br>Notice<br>Period |
|-------------------------------------|-----------------------|-------------------|----------------------------------------------------|-------------------------------------------------------|--------------------------------|
|                                     | 2018                  | 2017              |                                                    |                                                       |                                |
|                                     | <i>(in thousands)</i> |                   |                                                    |                                                       |                                |
| Real estate <sup>(1)</sup>          | \$ -                  | \$ 2              | \$ -                                               | Quarterly                                             | 45 days                        |
| Limited partnerships <sup>(2)</sup> | 195,759               | 193,519           | 219,501                                            | N/A                                                   | N/A                            |
| Collective trust                    | 9,536                 | 16,134            | -                                                  | Daily                                                 | None                           |
| <b>Total</b>                        | <b>\$ 205,295</b>     | <b>\$ 209,655</b> | <b>\$ 219,501</b>                                  |                                                       |                                |

<sup>(1)</sup>Real estate primarily includes investments in pooled separate accounts and real estate investment trusts, concentrated in U.S. commercial real estate. Redemptions are subject to management's and/or board of director's approval.

<sup>(2)</sup>Limited partnerships include investments in several fund of funds limited partnerships that invest primarily in U.S. and foreign companies. These investments can never be redeemed with the funds. Instead, the nature of the investments is that distributions are received through the liquidation of the underlying assets of the funds. If these investments were held, it is estimated that the underlying assets of the funds would be liquidated over 10-15 years.

### Commitments

The Pension Trust invests in certain real estate and limited partnerships investments whereby the Pension Trust commits to providing certain funds primarily on an "as needed" basis. During the year ended December 31, 2018, the Pension Trust increased commitments by approximately \$185 million and increased contributed capital by approximately \$20 million. At December 31, 2018, the Pension Trust was committed to funding approximately \$220 million for such investments over a period not exceeding six years.

### Investment Transactions and Investment Income

Net appreciation or depreciation in fair value of investments includes realized and unrealized gains or losses on investments bought, sold, as well as held during the year.

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividend income is recorded on the ex-dividend date.

### 7. Interest in the Schlumberger Group Trust

A portion of the Pension Trust's investments are in the Group Trust. The Group Trust serves as the investing medium for the Pension Trust and a certain other trust and plan of Schlumberger Limited and its affiliates. Each participating trust and plan has an allocable interest in the Group Trust. The assets of the Group Trust are held by the Trustee. At December 31, 2018 and 2017, the Pension Trust's interest in the net assets of the Group Trust was approximately 40.51% (\$4.031 billion) and 44.48% (\$4.416 billion), respectively. Investment income and certain administrative expenses relating to the Group Trust are allocated to the individual trusts and the Plans based upon average monthly balances invested by each trust and plan in the underlying pooled investments of the Group Trust. Other administrative expenses are allocated to each trust and plan based on the specific services provided to them.

At December 31, 2018 and 2017, the Pension Trust's interest in the Group Trust investments was approximately as follows:

|                                                                                   | 2018    | 2017    |
|-----------------------------------------------------------------------------------|---------|---------|
| U.S. Equity Index                                                                 | 4.45%   | 31.60%  |
| Fixed Income - Short Term                                                         | 13.02%  | 11.05%  |
| Treasury Inflation Protected Securities ("TIPS")                                  | 53.50%  | 79.11%  |
| Long Duration Bonds                                                               | 0.00%   | 95.70%  |
| Portable Alpha Equity                                                             | 0.00%   | 99.49%  |
| Large Cap Equity                                                                  | 0.00%   | 21.83%  |
| Mid Cap Equity                                                                    | 13.08%  | 29.48%  |
| Small Cap Equity                                                                  | 56.29%  | 63.39%  |
| Low Volatility Equity                                                             | 40.11%  | 65.45%  |
| Emerging Markets                                                                  | 19.08%  | 29.90%  |
| International Developed Markets                                                   | 14.52%  | 39.44%  |
| Real Estate                                                                       | 55.47%  | 68.29%  |
| US Separate Trading of Registered Interest and Principal of Securities ("STRIPS") | 99.33%  | 100.00% |
| Long Credit Pool                                                                  | 99.04%  | 0.00%   |
| Equity Overlay Pool                                                               | 100.00% | 0.00%   |

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

The following table presents the investment assets and liabilities of the Group Trust as of December 31, 2018 and 2017, based on long-term strategic asset allocation:

| <b>December 31,</b>                                                                                                          | <b>2018</b>         | <b>2017</b>         |
|------------------------------------------------------------------------------------------------------------------------------|---------------------|---------------------|
| <i>(in thousands)</i>                                                                                                        |                     |                     |
| <b>Investments, at fair value:</b>                                                                                           |                     |                     |
| U.S. Equity Index Pool (including \$86,826 and \$99,190 of securities on loan at 2018 and 2017, respectively)                | \$ 1,084,040        | \$ 1,518,253        |
| Other Equity Indexed Pool (including \$38,676 and \$41,794 of securities on loan at 2018 and 2017, respectively)             | 436,922             | 448,541             |
| Fixed Income - Short Term Pool (including \$66,548 and \$74,269 of securities on loan at 2018 and 2017, respectively)        | 318,859             | 220,279             |
| Fixed Income - Long Term Pool (including \$128,141 and \$258,610 of securities on loan at 2018 and 2017, respectively)       | 1,169,079           | 1,172,528           |
| LDI Pool (including \$10,123 and \$206,323 of securities on loan at 2018 and 2017, respectively)                             | 74,505              | 1,317,410           |
| Portable Alpha Equity Pool (including \$0 and \$77,131 of securities on loan at 2018 and 2017, respectively)                 | -                   | 339,130             |
| TIPS Pool                                                                                                                    | 143,295             | 231,031             |
| Large Cap Equity Pool (including \$14,926 and \$13,935 of securities on loan at 2018 and 2017, respectively)                 | 101,972             | 153,286             |
| Mid Cap Equity Pool (including \$41,796 and \$54,718 of securities on loan at 2018 and 2017, respectively)                   | 240,705             | 287,013             |
| Small Cap Equity Pool (including \$47,685 and \$73,783 of securities on loan at 2018 and 2017, respectively)                 | 287,584             | 530,187             |
| Low Volatility Equity Pool (including \$51,542 and \$53,073 of securities on loan at 2018 and 2017, respectively)            | 783,561             | 796,939             |
| Bank Loans Pool                                                                                                              | 176,794             | 102,095             |
| Real Estate Pool                                                                                                             | 171,022             | 229,320             |
| High Yield Pool (including \$13,923 and \$20,390 of securities on loan at 2018 and 2017, respectively)                       | 55,415              | 102,211             |
| Emerging Markets Pool (including \$61,188 and \$63,094 of securities on loan at 2018 and 2017, respectively)                 | 588,701             | 564,668             |
| International Developed Markets Pool (including \$71,970 and \$106,909 of securities on loan at 2018 and 2017, respectively) | 1,337,211           | 1,792,802           |
| US STRIPS Pool (including \$121,018 and \$43,548 of securities on loan at 2018 and 2017, respectively)                       | 942,462             | 122,572             |
| Short-term securities (security lending)                                                                                     | 852,053             | 1,186,764           |
| Long Credit Pool (including \$97,892 of securities on loan at 2018)                                                          | 1,971,955           | -                   |
| Equity Overlay Pool                                                                                                          | 66,717              | -                   |
|                                                                                                                              | <b>10,802,852</b>   | <b>11,115,029</b>   |
| <b>Liabilities</b>                                                                                                           |                     |                     |
| Obligations under security lending agreement                                                                                 | 852,053             | 1,186,764           |
|                                                                                                                              | <b>\$ 9,950,799</b> | <b>\$ 9,928,265</b> |

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

The following table presents the net assets of the Group Trust as of December 31, 2018 and 2017:

| <b>December 31,</b>                                                        | <b>2018</b>       | <b>2017</b>       |
|----------------------------------------------------------------------------|-------------------|-------------------|
| <i>(in thousands)</i>                                                      |                   |                   |
| <b>Assets</b>                                                              |                   |                   |
| <b>Investments, at fair value:</b>                                         |                   |                   |
| Cash and cash equivalents                                                  | \$ 328,383        | \$ 481,370        |
| Common stocks and other equities                                           | 3,858,307         | 4,665,486         |
| Mutual funds and other registered investment companies                     | 386,588           | 702,998           |
| Corporate bonds and other fixed income obligations                         | 2,252,252         | 1,607,011         |
| Government and other related bonds                                         | 1,841,295         | 1,404,296         |
| Government mortgage-backed securities and other collateralized obligations | 688,662           | 627,005           |
| Collective and other trusts                                                | 536,333           | 564,589           |
| Bank loans                                                                 | 169,556           | 99,955            |
| Derivatives                                                                | 16,980            | 11,751            |
| Short-term securities under security lending agreement                     | 852,053           | 1,186,764         |
| <b>Total investments, at fair value</b>                                    | <b>10,930,409</b> | <b>11,351,225</b> |
| Due from brokers for securities sold                                       | 74,337            | 108,175           |
| Accrued income and other assets                                            | 82,824            | 42,531            |
| <b>Total Assets</b>                                                        | <b>11,087,570</b> | <b>11,501,931</b> |
| <b>Liabilities</b>                                                         |                   |                   |
| Derivatives                                                                | 34,276            | 7,162             |
| Obligations under security lending agreement                               | 852,053           | 1,186,764         |
| Due to broker for securities purchased                                     | 243,343           | 371,358           |
| Other liabilities                                                          | 7,099             | 8,382             |
| <b>Total liabilities</b>                                                   | <b>1,136,771</b>  | <b>1,573,666</b>  |
| <b>Net assets</b>                                                          | <b>9,950,799</b>  | <b>9,928,265</b>  |

The following table presents the investment income of the Group Trust:

| <b>Years ended December 31,</b>                              | <b>2018</b>         | <b>2017</b>         |
|--------------------------------------------------------------|---------------------|---------------------|
| <i>(in thousands)</i>                                        |                     |                     |
| <b>Investment income:</b>                                    |                     |                     |
| Net (depreciation) appreciation in fair value of investments | \$ (823,083)        | \$ 1,268,967        |
| Dividends and interest                                       | 296,910             | 252,739             |
| <b>Total investment (loss) income</b>                        | <b>\$ (526,173)</b> | <b>\$ 1,521,706</b> |

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

The following tables set forth by level, within the fair value hierarchy discussed in Note 2, the Group Trust's assets and liabilities underlying each investment pool at fair value as of December 31, 2018 and 2017:

| <b>Fair Value as of December 31, 2018</b>                                  | <b>Level 1</b> | <b>Level 2</b>    | <b>Level 3</b> | <b>Total</b>         |
|----------------------------------------------------------------------------|----------------|-------------------|----------------|----------------------|
| <i>(in thousands)</i>                                                      |                |                   |                |                      |
| <b>Investments, at fair value:</b>                                         |                |                   |                |                      |
| Cash and cash equivalents                                                  | \$ 293,490     | \$ 34,893         | \$ -           | \$ 328,383           |
| Common stocks and other equities                                           | 3,858,295      | -                 | 12             | 3,858,307            |
| Mutual funds and other registered investment companies                     | 386,588        | -                 | -              | 386,588              |
| Corporate bonds and other fixed income obligations                         | -              | 2,252,252         | -              | 2,252,252            |
| Government and other related bonds                                         | -              | 1,841,295         | -              | 1,841,295            |
| Government mortgage-backed securities and other collateralized obligations | -              | 688,662           | -              | 688,662              |
| Bank loans                                                                 | -              | 169,556           | -              | 169,556              |
| Derivatives                                                                | 3,438          | 13,542            | -              | 16,980               |
| Short-term securities under security lending agreement                     | -              | 852,053           | -              | 852,053              |
| Total investment assets in the fair value hierarchy                        | \$ 4,541,811   | \$ 5,852,253      | \$ 12          | 10,394,076           |
| Collective and other trusts, measured at net asset value(a)                |                |                   |                | 536,333              |
| <b>Total investments, at fair value</b>                                    |                |                   |                | <b>10,930,409</b>    |
| Due from broker for securities sold                                        |                |                   |                | 74,337               |
| Accrued income and other assets                                            |                |                   |                | 82,824               |
| <b>Total assets</b>                                                        |                |                   |                | <b>\$ 11,087,570</b> |
| <b>Liabilities</b>                                                         |                |                   |                |                      |
| Derivatives                                                                | \$ 224         | \$ 34,052         | \$ -           | 34,276               |
| Obligations under security lending agreement                               | -              | 852,053           | -              | 852,053              |
| <b>Total liabilities, at fair value</b>                                    | <b>\$ 224</b>  | <b>\$ 886,105</b> | <b>\$ -</b>    | <b>886,329</b>       |
| Due to broker for securities purchased                                     |                |                   |                | 243,343              |
| Other liabilities                                                          |                |                   |                | 7,099                |
| <b>Total liabilities</b>                                                   |                |                   |                | <b>\$ 1,136,771</b>  |

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

| Fair Value as of December 31, 2017                                         | Level 1             | Level 2             | Level 3      | Total                |
|----------------------------------------------------------------------------|---------------------|---------------------|--------------|----------------------|
| <i>(in thousands)</i>                                                      |                     |                     |              |                      |
| <b>Investments, at fair value:</b>                                         |                     |                     |              |                      |
| Cash and cash equivalents                                                  | \$ 279,179          | \$ 202,191          | \$ -         | \$ 481,370           |
| Common stocks and other equities                                           | 4,665,412           | -                   | 74           | 4,665,486            |
| Mutual funds and other registered investment companies                     | 702,998             | -                   | -            | 702,998              |
| Corporate bonds and other fixed income obligations                         | -                   | 1,607,011           | -            | 1,607,011            |
| Government and other related bonds                                         | -                   | 1,404,296           | -            | 1,404,296            |
| Government mortgage-backed securities and other collateralized obligations | -                   | 627,005             | -            | 627,005              |
| Collective and other trusts                                                | -                   | -                   | -            | -                    |
| Bank loans                                                                 | -                   | 99,955              | -            | 99,955               |
| Derivatives                                                                | 176                 | 11,575              | -            | 11,751               |
| Short-term securities under security lending agreement                     | -                   | 1,186,764           | -            | 1,186,764            |
| <b>Total investment assets in the fair value hierarchy</b>                 | <b>\$ 5,647,765</b> | <b>\$ 5,138,797</b> | <b>\$ 74</b> | <b>\$ 10,786,636</b> |
| Collective and other trusts, measured at net asset value (a)               |                     |                     |              | 564,589              |
| <b>Total investments, at fair value</b>                                    |                     |                     |              | <b>11,351,225</b>    |
| Due from brokers for securities sold                                       |                     |                     |              | 108,175              |
| Accrued income and other assets                                            |                     |                     |              | 42,531               |
| <b>Total Assets</b>                                                        |                     |                     |              | <b>\$ 11,501,931</b> |
| <b>Liabilities</b>                                                         |                     |                     |              |                      |
| Derivatives                                                                | \$ 988              | \$ 6,174            | \$ -         | \$ 7,162             |
| Obligations under security lending agreement                               | -                   | 1,186,764           | -            | 1,186,764            |
| <b>Total liabilities, at fair value</b>                                    | <b>\$ 988</b>       | <b>\$ 1,192,938</b> | <b>\$ -</b>  | <b>\$ 1,193,926</b>  |
| Due to brokers for securities purchased                                    |                     |                     |              | 371,358              |
| Other liabilities                                                          |                     |                     |              | 8,382                |
| <b>Total Liabilities</b>                                                   |                     |                     |              | <b>\$ 1,573,666</b>  |

(a) Certain investments that are measured at fair value using the net asset value per share (or its equivalent) as a practical expedient have not been categorized in the fair value hierarchy. The fair value amounts presented in these tables are intended to and permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits of the Group Trust.

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

The following tables set forth a summary of changes in the fair value of the Group Trust's Level 3 assets for the years ended December 31, 2018 and 2017:

|                                                                    | Common stocks<br>and other equities |      | Total |
|--------------------------------------------------------------------|-------------------------------------|------|-------|
|                                                                    | <i>(in thousands)</i>               |      |       |
| <b>Balance, December 31, 2017</b>                                  | \$                                  | 74   | \$ 74 |
| Total gains included in changes in net assets:                     |                                     |      |       |
| Realized gains                                                     |                                     | 13   | 13    |
| Unrealized losses                                                  |                                     | (24) | (24)  |
| Purchases, sales and settlements:                                  |                                     |      |       |
| Purchases                                                          |                                     | 22   | 22    |
| Sales                                                              |                                     | (73) | (73)  |
| Settlements                                                        |                                     | -    | -     |
| <b>Balance, December 31, 2018</b>                                  |                                     | 12   | 12    |
| <b>Unrealized losses relating to assets still held at year-end</b> | \$                                  | -    | \$ -  |

|                                                                    | Common stocks<br>and other equities |    | Total |
|--------------------------------------------------------------------|-------------------------------------|----|-------|
|                                                                    | <i>(in thousands)</i>               |    |       |
| <b>Balance, December 31, 2016</b>                                  | \$                                  | 1  | \$ 1  |
| Total gains included in changes in net assets:                     |                                     |    |       |
| Realized gains                                                     |                                     | -  | -     |
| Unrealized gains                                                   |                                     | 3  | 3     |
| Purchases, sales and settlements:                                  |                                     |    |       |
| Purchases                                                          |                                     | 70 | 70    |
| Sales                                                              |                                     | -  | -     |
| Settlements                                                        |                                     | -  | -     |
| <b>Balance, December 31, 2017</b>                                  |                                     | 74 | 74    |
| <b>Unrealized losses relating to assets still held at year-end</b> | \$                                  | -  | \$ -  |

For the years ended December 31, 2018 and 2017, realized gains and unrealized gains (losses) from Level 3 assets and liabilities are reported in net appreciation (depreciation) in fair value of investments in the statements of changes in net assets of the Group Trust.

## Selected Schlumberger Pension Plans

### Notes to Financial Statements

The following table represents the Group Trust's Level 3 financial instruments, the valuation techniques used to measure the fair value of those financial instruments as of December 31, 2018 and 2017, and the significant unobservable inputs and the ranges of values for those inputs:

| Instrument                       | Fair Value (dollars in thousands) |                   | Principal Valuation Technique | Unobservable Inputs                                                           | Range (Weighted Average) |
|----------------------------------|-----------------------------------|-------------------|-------------------------------|-------------------------------------------------------------------------------|--------------------------|
|                                  | December 31, 2018                 | December 31, 2017 |                               |                                                                               |                          |
| Common stocks and other equities | \$ 12                             | \$ 74             | Market Approach               | Price adjustments based on comparable securities and other market assumptions | 0.0001%                  |
| <b>Total</b>                     | <b>\$ 12</b>                      | <b>\$ 74</b>      |                               |                                                                               |                          |

In estimating fair value of the investments in Level 3, the Group Trust may use third-party pricing sources. In substantiating the reasonableness of the pricing data provided by third parties, Plan management evaluates a variety of factors including review of methods and assumptions used by external sources, recently executed transactions, price movements of comparable securities, existing contracts, economic conditions, industry and market developments, and overall credit ratings.

The following table sets forth a summary of the investments held by the Group Trust reported at net asset value as a practical expedient as of December 31, 2018 and 2017:

|                                                      | Fair Value        |                   | Unfunded Commitments at December 31, 2018 | Redemption Frequency (If Currently Eligible) | Redemption Notice Period |
|------------------------------------------------------|-------------------|-------------------|-------------------------------------------|----------------------------------------------|--------------------------|
|                                                      | 2018              | 2017              |                                           |                                              |                          |
| <i>(in thousands)</i>                                |                   |                   |                                           |                                              |                          |
| <b>Collective and other trusts:</b>                  |                   |                   |                                           |                                              |                          |
| Prudential Retirement Real Estate Fund II            | \$ 171,022        | \$ 229,320        | \$ -                                      | Daily                                        | None                     |
| Pyramis Small Co. Commingled Pool Fund               | 142,073           | 261,943           | -                                         | Daily                                        | None                     |
| PIMCO Long Duration Corp Bond                        | 114,874           | -                 | -                                         | Daily                                        | None                     |
| PIMCO Short-Term Floating NAV Portfolio II           | 40,274            | 7,612             | -                                         | Daily                                        | None                     |
| NT Collective EAFE Index Fund - Non Lending          | 14,147            | 19,160            | -                                         | Daily                                        | None                     |
| NT Collective MSCI Emerging Markets Fund-Non Lending | 12,132            | 11,719            | -                                         | Daily                                        | None                     |
| JPM Long Duration Credit Fund                        | 11,090            | -                 | -                                         | Daily                                        | None                     |
| NT Collective Russell 1000 Index Fund - Non Lending  | 9,629             | 11,743            | -                                         | Daily                                        | None                     |
| NT Collective S&P 500 Index Fund - Non Lending       | 8,420             | 11,467            | -                                         | Daily                                        | None                     |
| JPM Extended Duration Fund                           | 5,065             | -                 | -                                         | Daily                                        | None                     |
| NT Collective S&P400 Index Fund - Non Lending        | 4,716             | 5,958             | -                                         | Daily                                        | None                     |
| NT Collective Russell 1000 Index Fund - Non Lending  | 2,891             | 5,667             | -                                         | Daily                                        | None                     |
|                                                      | <b>\$ 536,333</b> | <b>\$ 564,589</b> | <b>\$ -</b>                               |                                              |                          |

#### Valuation of Investments and Financial Liabilities

Cash and cash equivalents are stated at fair value. Foreign currency included in cash is translated using closing spot rates of exchange. Cash equivalents include repurchase agreements, U.S. Treasury bills and other highly liquid investments that are within three months of maturity when acquired, and short-term investment funds. Repurchase agreements are valued at amortized cost, which approximates fair value. U.S. government securities and government agency obligations included in cash equivalents are stated at fair value based on a bid evaluation. Short-term investment funds are stated using a constant price (or amortized cost) of \$1 per unit of participation, which approximates fair value. Other cash equivalents are valued on the basis of a bid evaluation or at amortized cost, which approximates fair value.

## Selected Schlumberger Pension Plans

### Notes to Financial Statements

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Equity securities include U.S. and international equity securities. U.S. equities include companies that are well diversified by industry sector and equity style (i.e., growth and value strategies). Active and passive management strategies are employed. Investments are primarily in large capitalization stocks and, to a lesser extent, mid-and small-cap stocks. International equities are invested in companies that are traded on exchanges outside the U.S. and are well diversified by industry sector, country and equity style. Active and passive strategies are employed. The vast majority of the investments are made in companies in developed markets with a small percentage in emerging markets.

Common stocks and most of other equities are stated at fair value as determined by closing quoted market prices in active markets in which the securities are traded. Certain other equity investments are valued at fair value based on bid or mid prices (i.e., the average of the bid and ask prices).

Mutual funds and other registered investment companies are stated at fair value. Mutual funds are valued at quoted market prices (available to institutions and retail clients) which represent the net asset value of shares owned by the Group Trust at year-end. Certain other registered investment companies are valued based on the net asset value of the units owned by the Group Trust at year-end as determined by the investment manager of the other registered investment companies based on the fair value of the underlying investments of the other registered investment companies. Exchange traded funds, also considered to be other registered investment companies, are valued at quoted market prices, which may not represent the net asset value of the units owned by the Group Trust at year-end. Other registered investment companies include an open-end interval management investment fund that offers its shareholders the opportunity to purchase and redeem shares on a periodic basis. The mutual funds and other registered investment companies held by the Group Trust are deemed to be actively traded.

Collective and other trusts are stated at the net asset value of the units of participation owned by the Group Trust at year end as determined by the trustees of the collective and other trusts based on the fair value of the underlying investments of the collective and other trusts. The net asset value is used as a practical expedient for measuring fair value.

Corporate bonds and other fixed income obligations consist primarily of investment grade bonds from diversified industries. Corporate bonds and other fixed income obligations are stated at fair value. Certain corporate bonds and other fixed income obligations are valued based on a bid evaluation while others are valued based on mid and bid prices (i.e., a bid price represents a price a dealer is ready to pay for a security). Oftentimes, bid evaluations use proprietary models under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks.

Government and other related bonds are comprised primarily of inflation protected U.S. treasuries, and to a lesser extent, other government-related securities (e.g., government agency obligations, and municipal and provincial bonds). Government and other related bonds are stated at fair value. Government and other related bonds, other than for those which have quoted market prices available, are valued based on a bid evaluation (i.e., an estimated price at which a dealer would pay for a security). Oftentimes, these evaluations use proprietary models under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks.

Government mortgage-backed securities and other collateralized obligations are debt obligations that represent claims to the cash flows from pools of credit cards, auto loans and mortgage loans which are purchased from banks, mortgage companies, and other originators and then assembled into pools by governmental, quasi-governmental and private entities. Government mortgage-backed securities and other collateralized obligations are stated at fair value. Government mortgage-backed securities and other collateralized obligations are valued based on a bid evaluation. Oftentimes, these evaluations use proprietary models under a discounted cash flows approach that maximizes observable inputs, such as

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current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks.

Bank loans consist of term bank loans and revolving bank loans which are traded in the secondary market. Bank loans are stated at fair value. Bank loans are based on bid evaluations. Oftentimes, these evaluations use proprietary models under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks.

Asset derivatives include options, rights, warrants, swaps, swaptions and pending foreign exchange purchases. Derivatives are stated at fair value. Exchange traded options and rights are valued based on a settlement price which is the price set by the exchange at the end of each day's trading. Pending foreign exchange purchases are marked-to-market based upon year-end forward exchange rates. Other derivatives are valued based on a bid price or a mid evaluation (i.e., the average of the estimated prices at which a dealer would pay for and sell a security). Oftentimes, these evaluations use proprietary models under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks.

Short-term securities under security lending agreement represent short-term investments purchased with proceeds from cash collateral received from borrowers of the Group Trust's securities. Short-term securities under the security lending agreement are valued at cost, which approximates fair value.

Other short-term securities are valued based on a bid evaluation or at amortized cost, which approximates fair value.

Liability derivatives (which include options, swaps, and pending foreign exchange sales) and other liabilities are stated at fair value. Exchange traded options are valued based on a settlement price which is the price set by the exchange at the end of each day's trading. Pending foreign exchange sales are marked-to-market based upon year-end forward exchange rates. Other derivatives are valued on the basis of a mid evaluation. Oftentimes, these evaluations use proprietary models under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks. Other liabilities are valued at cost, which approximates fair value.

The obligation under security lending agreement represents amounts due to borrowers of the Group Trust's securities for the cash collateral received from them. The amount due approximates fair value.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Group Trust believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The disclosures required by FASB ASC 820 are not required for due from brokers for securities sold, due to brokers for securities purchased, accrued income, other assets and other liabilities.

### ***Investment Transactions and Investment Income***

Net appreciation or depreciation in fair value of investments includes realized gains or losses on investments sold and unrealized gains or losses on investments held. Realized gains or losses on securities transactions are recorded as the difference between proceeds received and cost, with cost determined on the moving average basis. Unrealized gains or losses on investments represent the change in the

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## **Notes to Financial Statements**

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difference between the cost and fair value of investments at the end of the year and at the beginning of the year.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividend income is recorded on the ex-dividend date.

### ***Derivative Financial Instruments***

The Group Trust enters into various derivative financial instruments in carrying out its investment strategy, principally to: (1) hedge a portion of the Group Trust's portfolio to limit or minimize exposure to certain risks such as foreign exchange risk, interest rate risk, credit risk, and equity risk, (2) gain an exposure to a market more rapidly or less expensively than could be accomplished through the use of the cash markets, and (3) increase investment returns by reducing the cost of structuring the portfolio or by capturing value disparities between financial instruments.

Forward foreign exchange contracts are used to protect the Group Trust against the exchange risk associated with the Group Trust's investment in common stock and fixed income obligations denominated in foreign currency because the Group Trust is able to secure an exchange rate in the present for settlement at a future date. The terms of these contracts generally do not exceed one year. Risks in forward foreign exchange contracts arise from the possible inability of counterparties to meet the contract's terms and from movements in currency values.

The Group Trust reflects the fair value of all forward contracts as an asset (forward contracts to purchase foreign currency) or liability (forward contracts to sell foreign currency) in the Group Trust's statements of net assets. The change in value of these forward exchange contracts is included as unrealized gains or losses in the changes in Group Trust net assets. When the forward exchange contract is closed, the Group Trust transfers the unrealized appreciation or depreciation to a realized gain or loss equal to the change in the value of the forward exchange contract when it was opened and the value at the time it was closed or offset. Unrealized and realized gains and losses are included in net appreciation (depreciation) in the Group Trust's statements of changes in net assets.

Interest rate contracts such as fixed income futures, interest rate swaps, and option premiums are used to manage the interest rate risk.

The Group Trust enters into fixed-income futures contracts in the normal course of its investment activities to reduce the interest rate risk associated with its fixed-income investments, to replicate government bond positions, and as a duration management tool to enhance portfolio returns.

Upon entering into a fixed-income futures contract, the Group Trust is required to pledge to the broker an amount of cash and/or liquid securities equal to the minimum "initial margin" requirements of the exchange. Pursuant to the futures contract, the Group Trust agrees to receive from, or pay to, the broker an amount of cash equal to the daily fluctuation in the value of the futures contract. Such receipts or payments are known as "variation margin" which is settled daily and is included in net appreciation (depreciation) in the changes in Group Trust net assets. The Group Trust records a variation margin receivable or payable in the Group Trust's statements of net assets for valuation margins which have not been received or paid at the end of the year. Fixed-income futures contracts are not included in the Group Trust's statements of net assets as cash settlements are made daily.

The risk of counterparty non-performance associated with the use of fixed-income futures is considered to be modest as performance is assured by the futures exchanges, which provide multiple layers of protection, such as the collection of variation margin on a daily basis and the use of standardized contracts to facilitate liquidity.

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Interest rate swaps are used to adjust interest rate and yield curve exposures and as a substitute for physical securities. Swap agreements involve the exchange by the Group Trust with a counterparty of the respective commitments to pay or receive interest with respect to a notional amount of principal. Market risk of loss is limited to changes in the fair value from December 31 of each year presented through the applicable expiration date. Long swap positions increase exposure to long-term interest rates while short positions decrease exposure. The Group Trust is subject to the risk of the counterparty to an interest rate swap agreement being unable or unwilling to make timely interest payments, or to otherwise honor its obligations.

The Group Trust reflects the fair value of all interest rate swaps as an asset or liability in the Group Trust's statements of net assets. Gains or losses on interest rate swaps are accounted in net appreciation (depreciation) in the Group Trust's statements of changes in net assets.

The Group Trust may buy or write put and call options through listed exchanges and in the over-the-counter ("OTC") market. When the Group Trust buys or writes an option, an amount equal to the premium paid or received by the Group Trust is recorded as an asset or liability and is subsequently adjusted to the current market value of the option purchased or written. The premiums paid or received from buying or writing options are recorded as realized gains or losses upon the expiration of the options. The difference between the premium and the amount paid or received on effecting a closing purchase or sale transaction also is treated as a realized gain or loss. If an option is exercised, the premium paid or received is recorded as a realized gain or loss if sold or an adjustment to cost if acquired. The Group Trust, as a writer of an option, may have no control over whether the underlying securities may be sold (call) or purchased (put) and as a result bears the market risk of an unfavorable change in the price of the security underlying the written option. Options to purchase and sell fixed income securities and swaptions are used to manage interest rate and volatility exposure, while credit spreads are used to manage credit risk. Options will become worthless at expiration if the underlying instrument does not reach the strike price of the option.

The Group Trust may use derivatives including stock rights and warrants as a substitute for investment in equity and fixed-income securities or to reduce the effect of fluctuating foreign currencies on foreign currency denominated investments.

Rights are the right, but not the obligation, to purchase newly issued equity shares, often in proportion to the number of shares currently owned, in a specified company, at a pre-established price on or within a pre-determined date. Rights are privately transacted in OTC markets. Rights are subject to general market risk and liquidity risk.

A warrant provides the holder the right, but not the obligation, to purchase securities from the issuing entity at a specific price and within a certain time period. Warrants are privately transacted in OTC markets. The Group Trust may purchase or receive warrants from its investment in the debt or equity of a company. The warrants provide the Group Trust with exposure and potential gains upon equity appreciation of the company's share price.

The value of a warrant has two components: time value and intrinsic value. A warrant has a limited life and expires on a certain date. As the expiration date of a warrant approaches, the time value of a warrant will decline. In addition, if the stock underlying the warrant declines in price, the intrinsic value of an "in the money" warrant will decline. Further, if the price of the stock underlying the warrant does not exceed the strike price of the warrant on the expiration date, the warrant will expire worthless. As a result, there is the potential for the Group Trust to lose its entire investment in a warrant.

Credit default swaps ("CDS") are used to manage credit exposure without buying or selling securities outright. Written CDS increase credit exposure ("selling protection"), obligating the portfolio to buy bonds from counterparties in the event of a default. Purchased CDS decrease exposure ("buying protection"), providing the right to "put" bonds to the counterparty in the event of a default. CDS agreements involve

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one party making a stream of payments (referred to as the buyer of protection) to another party (the seller of protection) in exchange for the right to receive a specified return in the event of a default or other credit event for the referenced entity, obligation or index. As a seller of protection on credit default swap agreements, the Group Trust will generally receive from the buyer of protection a fixed rate of income throughout the term of the swap provided that there is no credit event. Typical credit events include bankruptcy, dissolution or insolvency of the referenced entity, failure to pay and restructuring of the obligations of the referenced entity. As the seller, the Group Trust would effectively add leverage to its portfolio because, in addition to its total net assets, the Group Trust would be subject to investment exposure on the notional amount of the swap.

If the Group Trust is a seller of protection and a credit event occurs, as defined under the terms of that particular swap agreement, the Group Trust will either (i) pay to the buyer of protection an amount equal to the notional amount of the swap and take delivery of the referenced obligation, other deliverable obligations or underlying securities comprising the referenced index or (ii) pay a net settlement amount in the form of cash or securities equal to the notional amount of the swap less the recovery value of the referenced obligation or underlying securities comprising the referenced index. If the Group Trust is a buyer of protection and a credit event occurs, as defined under the terms of that particular swap agreement, the Group Trust will either (i) receive from the seller of protection an amount equal to the notional amount of the swap and deliver the referenced obligation, other deliverable obligations or underlying securities comprising the referenced index or (ii) receive a net settlement amount in the form of cash or securities equal to the notional amount of the swap less the recovery value of the referenced obligation or underlying securities comprising the referenced index.

The Group Trust may use credit default swaps on corporate issues, sovereign issues of an emerging country or U.S. municipal issues to provide a measure of protection against defaults of the issuers (i.e., to reduce risk where the Group Trust owns or has exposure to the referenced obligation) or to take an active long or short position with respect to the likelihood of a particular issuer's default. The Group Trust also may use credit default swaps on credit indices to hedge a portfolio of credit default swaps or bonds, which is less expensive than it would be to buy many credit default swaps to achieve a similar effect. Credit default swaps on indices are benchmarks for protecting investors owning bonds against default, and traders use them to speculate on changes in credit quality. At December 31, 2018 and 2017, the Group Trust did not hold credit default swaps where the Group Trust was a seller of protection.

The maximum potential amount of future payments (undiscounted) that the Group Trust as a seller of protection could be required to make under a credit default swap agreement would be an amount equal to the notional amount of the agreement. These potential amounts would be partially offset by any recovery values of the respective referenced obligations, upfront payments received upon entering into the agreement, or net amounts received from the settlement of buy protection credit default swap agreements entered into by the Group Trust for the same referenced entity or entities. Securities or cash may be identified as collateral or margin in accordance with the terms of the respective swap agreements to provide assets of value and recourse in the event of default or bankruptcy/insolvency.

Implied credit spreads, represented in absolute terms, utilized in determining the market value of credit default swap agreements on corporate, sovereign, U.S. municipal or U.S. Treasury obligation issues as of period end serve as an indicator of the current status of the payment/performance risk and represent the likelihood or risk of default for the credit derivative. The implied credit spread of a particular referenced entity reflects the cost of buying/selling protection and may include upfront payments required to be made to enter into the agreement. Wider credit spreads represent a deterioration of the referenced entity's credit soundness and a greater likelihood or risk of default or other credit event occurring as defined under the terms of the agreement.

The Group Trust reflects the fair value of all CDS as an asset or liability in the Group Trust's statements of net assets. Gains or losses on CDS are accounted in net appreciation (depreciation) in the Group Trust's statements of changes in net assets.

## **Selected Schlumberger Pension Plans**

### **Notes to Financial Statements**

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The Group Trust enters into equity futures contracts in the normal course of its investment activities to replicate exposure to US and Non-US equity markets. Upon entering into an equity futures contract, the Group Trust is required to pledge to the broker an amount of cash and/or liquid securities, equal to the minimum "initial margin" requirements of the exchange. Pursuant to the futures contract, the Group Trust agrees to receive from, or pay to, the broker an amount of cash equal to the daily fluctuation in the value of the futures contract. Such receipts or payments are known as "variation margin" which is settled daily and is included in net appreciation (depreciation) in the changes in Group Trust net assets. The Group Trust records a variation margin receivable or payable in the Group Trust's statements of net assets for valuation margins which have not been received or paid at the end of the year. Equity futures contracts are not included in the Group Trust's statement of net assets as cash settlements are made daily.

U.S. Treasury Bills, U.S. Treasury Bonds, short-term investments, and cash with a fair value of \$6,379,615 and \$101,243,805 at December 31, 2018 and 2017, respectively, were posted by brokers and held by the Group Trust as collateral for derivative transactions. The notional amount of this collateral at December 31, 2018 and 2017 was \$6,390,000 and \$104,240,300, respectively.

Assets owned and included in the Group Trust's statements of net assets, with a fair value of \$77,447,108 and \$15,078,967 at December 31, 2018 and 2017, respectively, were held by the Group Trust's brokers as collateral for derivative transactions. The notional amount of this collateral at December 31, 2018 and 2017 was \$124,225,300 and \$14,575,000, respectively.

Certain of the Group Trust's derivative documents contain provisions, in addition to standard events of default, which if violated could cause a counterparty to declare a termination event and terminate the relevant agreement(s) with the Group Trust, which would result in a determination of the net amount due to or due from the counterparty and require immediate payment in accordance therewith. The aggregate fair value of all derivative instruments with credit-risk-related contingency features that are in a net liability position on December 31, 2018 and 2017 was \$34,275,878 and \$7,161,882, respectively. If the credit-risk-related contingency features underlying these agreements were triggered on December 31, 2018 and 2017 with respect to one or more counterparties and any of such counterparties declared a termination event, as of the effective date of termination all derivative positions would be valued in accordance with the valuation procedures set forth in the derivatives documentation and the net amount due to or due from the counterparty would be payable by or payable to the Group Trust, respectively.

The Group Trust is subject to various Master Agreements, which govern the terms of certain transactions with select counterparties. These Master Agreements reduce the counterparty risk associated with relevant transactions by specifying credit protection mechanisms and providing standardization that improves legal certainty. Since different types of forward and OTC financial derivative transactions have different mechanics and are sometimes traded out of different legal entities of a particular counterparty organization, each type of transaction may be covered by a different Master Agreement, resulting in the need for multiple agreements with a single counterparty. As the Master Agreements are specific to unique operations of different asset types, they allow the Group Trust to close out and net its total exposure to a counterparty in the event of a default with respect to all the transactions governed under a single agreement with that counterparty.

Master Agreements can also help limit counterparty risk by specifying collateral posting arrangements at pre-arranged exposure levels. Under the Master Agreements, collateral is routinely transferred if the total net exposure to certain transactions (net of existing collateral already in place) governed under the relevant master agreement with a counterparty in a given account exceeds a specified threshold, which typically ranges from zero to \$250,000 depending on the counterparty and the type of Master Agreement. United States Treasury Bills and U.S. dollar cash are generally the preferred forms of collateral, although other forms of AAA rated paper may be used. The Group Trust's overall exposure to counterparty risk

## Selected Schlumberger Pension Plans

### Notes to Financial Statements

can change substantially within a short period, as it is affected by each transaction subject to the relevant Master Agreement.

Fair value amounts recognized for derivative instruments and fair value amounts recognized for the right to reclaim or return cash collateral arising from derivative instruments recognized at fair value under master netting arrangements are presented on a gross basis in the Group Trust's statements of net assets. At December 31, 2018 and 2017, the Group Trust has the right to reclaim cash collateral under master netting arrangements of \$34,237,416 and \$5,413,637, respectively. At December 31, 2018 and 2017, the Group Trust has the obligation to return cash collateral under master netting arrangements of \$7,097,830 and \$8,384,332, respectively.

At December 31, 2018 and 2017, the notional values of derivative contracts were as follows:

|                            | Long Contracts |            | Short Contracts |              |
|----------------------------|----------------|------------|-----------------|--------------|
|                            | 2018           | 2017       | 2018            | 2017         |
| <i>(in thousands)</i>      |                |            |                 |              |
| Interest rate contracts    | \$ 489,961     | \$ 147,610 | \$ (737,545)    | \$ (298,762) |
| Foreign exchange contracts | 77,497         | 161,026    | (77,693)        | (163,701)    |
| Equity contracts           | 3,739          | 342        | (157)           | (948)        |
| Credit contracts           | -              | 200        | (31,500)        | -            |
|                            | \$ 571,197     | \$ 309,178 | \$ (846,895)    | \$ (463,411) |

As of December 31, 2018, and 2017, the fair values of outstanding derivative instruments and the location in the Group Trust's statements of net assets are summarized as follows:

| Derivatives not designated as hedging instruments under FASB ASC 815-20 | Fair Values of Derivative Instruments - Asset Derivatives |            |           |
|-------------------------------------------------------------------------|-----------------------------------------------------------|------------|-----------|
|                                                                         | Statement of net assets location                          | Fair Value |           |
|                                                                         |                                                           | 2018       | 2017      |
| <i>(in thousands)</i>                                                   |                                                           |            |           |
| Interest rate contracts                                                 | Other investments: Derivatives                            | \$ 11,720  | \$ 3,964  |
| Foreign exchange contracts                                              | Other investments: Derivatives                            | 812        | 811       |
| Equity contracts                                                        | Other investments: Derivatives                            | 4,448      | 6,976     |
| Total asset derivatives                                                 |                                                           | \$ 16,980  | \$ 11,751 |

| Derivatives not designated as hedging instruments under FASB ASC 815-20 | Fair Values of Derivative Instruments - Liability Derivatives |             |            |
|-------------------------------------------------------------------------|---------------------------------------------------------------|-------------|------------|
|                                                                         | Statement of net assets location                              | Fair Value  |            |
|                                                                         |                                                               | 2018        | 2017       |
| <i>(in thousands)</i>                                                   |                                                               |             |            |
| Interest rate contracts                                                 | Derivatives and other liabilities                             | \$ (7,277)  | \$ (2,714) |
| Foreign exchange contracts                                              | Derivatives and other liabilities                             | (1,008)     | (3,497)    |
| Equity contracts                                                        | Derivatives and other liabilities                             | (25,812)    | (948)      |
| Credit contracts                                                        | Derivatives and other liabilities                             | (179)       | (3)        |
| Total liability derivatives                                             |                                                               | \$ (34,276) | \$ (7,162) |

## Selected Schlumberger Pension Plans

### Notes to Financial Statements

For the years ended December 31, 2018 and 2017, the effect of derivative instruments on the Group Trust's statements of changes in net assets was as follows:

| Derivatives Not Designated<br>as Hedging Instruments<br>under FASB ASC 815-20 | Amount of (Loss) or Gain<br>Recognized in Net Appreciation<br>(Depreciation) in Fair Value<br>of Investments |            | Amount of Net (Expense)<br>Income Recognized in<br>Interest and Dividends |           |
|-------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------|-----------|
|                                                                               | 2018                                                                                                         | 2017       | 2018                                                                      | 2017      |
|                                                                               |                                                                                                              |            |                                                                           |           |
| <i>(in thousands)</i>                                                         |                                                                                                              |            |                                                                           |           |
| Interest rate contracts                                                       | \$ 2,002                                                                                                     | \$ 2,693   | \$ 400                                                                    | \$ 124    |
| Foreign exchange contracts                                                    | 2,348                                                                                                        | (7,187)    | -                                                                         | -         |
| Equity contracts                                                              | (106,600)                                                                                                    | 109,613    | 32,307                                                                    | 22,783    |
| Credit contracts                                                              | 3                                                                                                            | (51)       | (15)                                                                      | (33)      |
| Total                                                                         | \$ (102,247)                                                                                                 | \$ 105,068 | \$ 32,692                                                                 | \$ 22,874 |

As of December 31, 2018 and 2017, the Group Trust holds certain derivative instruments that are eligible for offset in the statements of net assets and are subject to the terms of master netting arrangements between the Group Trust and select counterparties. In the case of default, the master netting arrangement allows the Group Trust to close out and net its total exposure to a counterparty with respect to all the transactions governed under a single agreement with that counterparty. For financial reporting purposes, the Group Trust does not offset derivative assets and derivative liabilities that are subject to master netting agreements in the statements of net assets.

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

The following tables provide information relating to the potential effect of offsetting of recognized derivative assets and liabilities which are subject to an enforceable master netting arrangement, presented in the Group Trust's statements of net assets:

|                                                                                           |               | (b)           | (c)=(a-b)     | (d)                             |              |            |
|-------------------------------------------------------------------------------------------|---------------|---------------|---------------|---------------------------------|--------------|------------|
|                                                                                           |               | Gross Amounts | Net Amounts   | Gross Amounts Not Offset in the |              |            |
|                                                                                           |               | Offset in the | Presented in  | Statement of Net Assets         |              |            |
|                                                                                           | (a)           | Statement of  | the Statement | Financial                       | Collateral   | (e)=(c-d)  |
| As of December 31, 2018                                                                   | Gross Amounts | Net Assets    | of Net Assets | Instruments                     | Received     | Net Amount |
| (in thousands)                                                                            |               |               |               |                                 |              |            |
| Assets                                                                                    |               |               |               |                                 |              |            |
| Asset derivatives, subject to a master netting arrangement or similar arrangement         | \$ 7,763      | \$ -          | \$ 7,763      | \$ (6,711)                      | \$ (818)     | \$ 234     |
| Repurchase agreements                                                                     | -             | -             | -             | -                               | -            | \$ -       |
| Security lending                                                                          | 833,669       | -             | 833,669       | -                               | (833,669)    | \$ -       |
|                                                                                           | \$ 841,432    | \$ -          | \$ 841,432    | \$ (6,711)                      | \$ (834,487) | \$ 234     |
| Asset derivatives, not subject to a master netting arrangement or similar arrangement     | \$ 9,218      | \$ -          | \$ 9,218      |                                 |              |            |
| Total Assets                                                                              | \$ 850,650    | \$ -          | \$ 850,650    |                                 |              |            |
| Liabilities                                                                               |               |               |               |                                 |              |            |
| Liability derivatives, subject to a master netting arrangement or similar arrangement     | \$ 32,221     | \$ -          | \$ 32,221     | \$ (6,711)                      | \$ (25,047)  | \$ 463     |
| Liability derivatives, not subject to a master netting arrangement or similar arrangement | \$ 2,055      | \$ -          | \$ 2,055      |                                 |              |            |
| Total Liabilities                                                                         | \$ 34,276     | \$ -          | \$ 34,276     |                                 |              |            |

| As of December 31, 2017                                                                         | (a)<br>Gross Amounts | (b)                                                          | (c)=(a-b)                                                     | (d)                                                        |                        | (e)=(c-d)<br>Net Amount |
|-------------------------------------------------------------------------------------------------|----------------------|--------------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------|------------------------|-------------------------|
|                                                                                                 |                      | Gross Amounts<br>Offset in the<br>Statement of<br>Net Assets | Net Amounts<br>Presented in<br>the Statement<br>of Net Assets | Gross Amounts Not Offset in the<br>Statement of Net Assets |                        |                         |
|                                                                                                 |                      |                                                              |                                                               | Financial<br>Instruments                                   | Collateral<br>Received |                         |
| (in thousands)                                                                                  |                      |                                                              |                                                               |                                                            |                        |                         |
| Assets                                                                                          |                      |                                                              |                                                               |                                                            |                        |                         |
| Asset derivatives, subject to a<br>master netting arrangement or<br>similar arrangement         | \$ 8,784             | \$ -                                                         | \$ 8,784                                                      | \$ (1,830)                                                 | \$ (4,510)             | \$ 2,444                |
| Repurchase agreements                                                                           | 91,700               | -                                                            | 91,700                                                        | -                                                          | (91,700)               | \$ -                    |
| Security lending                                                                                | 1,155,887            | -                                                            | 1,155,887                                                     | -                                                          | (1,155,887)            | \$ -                    |
|                                                                                                 | \$ 1,256,371         | \$ -                                                         | \$ 1,256,371                                                  | \$ (1,830)                                                 | \$ (1,252,097)         | \$ 2,444                |
| Asset derivatives, not subject to a<br>master netting arrangement or<br>similar arrangement     | \$ 2,967             | \$ -                                                         | \$ 2,967                                                      |                                                            |                        |                         |
| <b>Total Assets</b>                                                                             | \$ 1,259,338         | \$ -                                                         | \$ 1,259,338                                                  |                                                            |                        |                         |
| Liabilities                                                                                     |                      |                                                              |                                                               |                                                            |                        |                         |
| Liability derivatives, subject to a<br>master netting arrangement or<br>similar arrangement     | \$ 4,870             | \$ -                                                         | \$ 4,870                                                      | \$ (1,830)                                                 | \$ (2,073)             | \$ 967                  |
| Liability derivatives, not subject to<br>a master netting arrangement or<br>similar arrangement | \$ 2,292             | \$ -                                                         | \$ 2,292                                                      |                                                            |                        |                         |
| <b>Total Liabilities</b>                                                                        | \$ 7,162             | \$ -                                                         | \$ 7,162                                                      |                                                            |                        |                         |

# **Selected Schlumberger Pension Plans**

## **Notes to Financial Statements**

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### ***Security Lending***

Pursuant to the investment objectives of the Group Trust, stock loan transactions are permitted with the objective of adding investment income to the Group Trust. The Group Trust may lend securities held to unaffiliated broker-dealers registered under the Securities Exchange Act of 1934, or banks organized in the United States of America through the Group Trust's participation in the Trustee's securities lending program. At all times, the borrower must maintain cash or equivalent collateral equal in value to at least 100 percent of the value of the securities loaned. The cash collateral generally is invested in short-term securities which generate income that is allocated between the security lending agent and the Group Trust at predetermined contractual rates. The primary risk in lending securities is that a third-party borrower may default during a sharp rise in the price of the security that was borrowed, resulting in a deficiency in the collateral posted by the third-party borrower. The Group Trust seeks to minimize this risk by requiring that the market value of the loaned securities is recomputed each day and that additional collateral is furnished daily, if necessary. The Group Trust records cash collateral received from the third-party borrower as an asset and also records a corresponding liability for the return of the cash collateral. The Group Trust bears the risk of loss with respect to the unfavorable change in fair value of the invested cash collateral. The fair value of the securities loaned in the Group Trust securities lending program amounted to \$833,669,375 and \$1,155,886,906 at December 31, 2018 and 2017, respectively, and is included in Investments in the Group Trust. The Group Trust recorded gross earnings from lending securities of \$22,863,868 and \$13,425,854 in 2018 and 2017, respectively, and net income of \$3,634,972 and \$4,113,208 in 2018 and 2017, respectively. Participating brokers received \$18,515,429 and \$8,514,367 for rebates in 2018 and 2017, respectively, and the Trustee received \$713,466 and \$798,279 in 2018 and 2017, respectively, for fees relating to security lending activity.

### **8. Tax Status**

The Technology Plan and the U.S. Abroad Plan obtained their latest determination letters on September 27, 2012 and August 2, 2012, respectively, in which the Internal Revenue Service stated that the Plans were in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). The Plans have since been amended, and received determination letters dated February 13, 2018, which stated that the Plans, as amended, are in compliance with applicable requirements of the IRS. The Plans are required to operate in conformity with the IRC to maintain the tax-exempt status. The Plans' management and tax counsel believe that the Plans currently are designed and being operated in compliance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plans and recognize a tax liability if the Plans have taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plans are subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

### **9. Related Party and Party-in-Interest Transactions**

Fees paid to the Trustee by the Pension Trust were approximately \$751,425 and \$951,979 for the years ended December 31, 2018 and 2017, respectively. A portion of these fees are allocated to the Plans. Through their interest in the Pension Trust, certain investments held by the Plans are managed by the Trustee or an affiliate of the Trustee. Transactions in such investments qualify as party-in-interest transactions which are exempt from the prohibited transactions rules under ERISA. As described in Note 2, the Plans paid certain expenses related to plan operations to various service providers. These transactions are party-in-interest transactions under ERISA.

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

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### 10. 401(h) Account

Effective October 26, 2005, the Technology Plan was amended to include a medical-benefit component in addition to the retirement benefit component, to fund a portion of the postretirement healthcare obligations for eligible retirees and specified beneficiaries, in accordance with Section 401(h) of the IRC. A separate account has been established and maintained in the Technology Plan for the net assets related to the medical-benefit component (the "401(h) account"). Assets held in the 401(h) account are invested together with other Technology Plan assets and a proportionate share of the investment gain and loss of the Pension Trust is allocated to the 401(h) account, as specified by the Finance Committee. As required by IRC Section 401(h), the Technology Plan's assets in the 401(h) account may not be used for, or diverted to, any purpose other than providing healthcare benefits for retirees and their beneficiaries. Assets in the 401(h) account derive primarily from direct contributions from the Employer, which contributions are calculated and funded at the discretion of the Finance Committee. Technology Plan participants do not contribute to the 401(h) account. There also is the possibility that assets may derive from qualified transfers of excess assets from the retirement benefits account, in accordance with IRC Section 420. Any assets thus transferred (and any investment income allocable thereto) that are not used during the plan year must be transferred back into the retirement benefits account in the Pension Trust. The related obligations for healthcare benefits are not included in this Technology Plan's obligations in the statement of accumulated plan benefits, but are reflected as obligations in the financial statements of the Schlumberger Group Welfare Benefits Plan. In the event an individual's interest in the 401(h) account is forfeited prior to (a) the termination of the Technology Plan, (b) elimination of the obligation to provide retiree medical benefits hereunder, or (c) termination of all of the Retiree Medical Benefit Program, an amount equal to the amount of such forfeiture shall be applied as soon as practicable thereafter to reduce the Employer's future contributions to the 401(h) account. Any amounts remaining in the 401(h) account after the satisfaction of all liabilities for such retiree healthcare benefits shall be returned to the Employer.

### 11. Reconciliation to the Form 5500

The following is a reconciliation of the Technology Plan's net assets available for pension benefits per the financial statements to the Form 5500 of the Technology Plan:

| <i><b>December 31,</b></i>                                               | <b>2018</b>             | <b>2017</b>      |
|--------------------------------------------------------------------------|-------------------------|------------------|
| Net assets available for benefits per the financial statements           | <b>\$ 3,715,884,512</b> | \$ 4,020,595,251 |
| Net assets held in 401(h) account included as assets in the<br>Form 5500 | <b>305,143,629</b>      | 373,970,110      |
| Net assets available for benefits per the Form 5500                      | <b>\$ 4,021,028,141</b> | \$ 4,394,565,361 |

The net assets of the 401(h) account included in the Technology Plan's Form 5500 are not available to pay pension benefits but may only be used to pay retiree health benefits.

# Selected Schlumberger Pension Plans

## Notes to Financial Statements

The following is a reconciliation of the Technology Plan's net investment gain or loss from master trust investment accounts per the financial statements to the Technology Plan's Form 5500 for the year ended December 31, 2018:

| <i><b>Year ended December 31, 2018</b></i>           | <b>Amounts per<br/>Financial<br/>Statements</b> | <b>401(h) Account</b> | <b>Amounts per<br/>Form 5500</b> |
|------------------------------------------------------|-------------------------------------------------|-----------------------|----------------------------------|
| <b>Plan interest in the Pension Trust investment</b> |                                                 |                       |                                  |
| <b>income consists of:</b>                           |                                                 |                       |                                  |
| Interest and other income                            | \$ 261,806                                      | \$ 33,576             | \$ 295,382                       |
| Net depreciation in fair value of investments        | (97,104,050)                                    | (15,449,688)          | \$(112,553,738)                  |
| Benefits paid to participants from 401(h) account    | -                                               | (52,579,371)          | \$ (52,579,371)                  |
| Administrative expenses                              | (12,960,550)                                    | (830,997)             | \$ (13,791,547)                  |
| <b>Total</b>                                         | <b>(109,802,794)</b>                            | <b>(68,826,480)</b>   | <b>(178,629,274)</b>             |
| Employer contributions                               | \$ -                                            | \$ -                  | \$ -                             |

## 12. Subsequent Events

For purposes of determining the effect of subsequent events on these financial statements, management has evaluated events through October 11, 2019, the date on which the financial statements were available to be issued.

**Attachment to 2018 Schedule SB of Form 5500**  
**Schedule SB, Line 26 – Schedule of Active Participant Data**  
**Schlumberger Technology Corporation Pension Plan**  
**EIN 22-1692661 PN 007**

**Participants in Active Service by Age, Years of Service and Average Salary\***

| Age       | Years of Benefit Service |     |     |           |           |           |           |           |           |           |
|-----------|--------------------------|-----|-----|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
|           | Less than 1              | 1-4 | 5-9 | 10-14     | 15 - 19   | 20 - 24   | 25 - 29   | 30 - 34   | 35 - 39   | 40 & Over |
| Under 25  | --                       | --  | --  | --        | --        | --        | --        | --        | --        | --        |
| 25 - 29   | --                       | --  | --  | --        | --        | --        | --        | --        | --        | --        |
| 30 - 34   | --                       | --  | --  | 8         | --        | --        | --        | --        | --        | --        |
| 35 - 39   | --                       | --  | --  | 74        | 76        | 1         | --        | --        | --        | --        |
| 40 - 44   | --                       | --  | 1   | 44        | 298       | 49        | 1         | --        | --        | --        |
| 45 - 49   | --                       | --  | 2   | 38        | 203       | 194       | 27        | --        | --        | --        |
| 50 - 54   | --                       | --  | 1   | 28        | 171       | 125       | 105       | 18        | 1         | --        |
| 55 - 59   | --                       | --  | --  | 20        | 187       | 118       | 80        | 59        | 27        | 1         |
| 60 - 64   | --                       | --  | --  | 7         | 124       | 47        | 32        | 19        | 45        | 10        |
| 65 - 69   | --                       | --  | --  | 4         | 31        | 8         | 6         | 5         | 7         | 2         |
| 70 & Over | --                       | --  | --  | 1         | 2         | --        | 1         | --        | --        | --        |
| Total     | --                       | --  | 4   | 224       | 1,092     | 541       | 252       | 101       | 80        | 13        |
|           | --                       | --  | --  | \$124,711 | \$141,429 | \$172,942 | \$179,612 | \$188,063 | \$164,075 | --        |

\* Only includes actives accruing benefits.

**Attachment to 2018 Schedule SB of Form 5500**  
**Schedule SB, Part V – Statement of Actuarial Assumptions/Methods**  
**Schlumberger Technology Corporation Pension Plan**  
**EIN 22-1692661 PN 007**

**Actuarial Assumptions and Methodologies (Funding)**

Certain assumptions are prescribed as noted below. The other assumptions are estimates derived from historical and recent experience as well as market observations, combined with professional judgment about future expectations.

Interest:

The interest rates used for the 2018 plan year are the 24-month average corporate bond segment rates for September 2017 (a 4-month lookback) subject to funding stabilization. Under stabilization, the interest rates used for funding purposes are calculated in the usual manner (24-month average corporate bond rates) but are then constrained to be within a corridor around a 25-year average of those same bond rates. For 2018, the stabilization corridor is 10%. Under current law, it is scheduled to remain at 10% through 2020, then increase by 5% per year until it reaches 30% for 2024. The rates are as follows:

|                                        | Payments in the First 5 Years | Payments in Years 6 – 20 | Payments Thereafter | Effective Interest Rate |
|----------------------------------------|-------------------------------|--------------------------|---------------------|-------------------------|
| Current Year, reflecting stabilization | 3.92%                         | 5.52%                    | 6.29%               | 5.72%                   |
| Current Year, without stabilization    | 1.75%                         | 3.76%                    | 4.66%               | 4.07%                   |
| Prior Year, reflecting stabilization   | 4.16%                         | 5.72%                    | 6.48%               | 5.92%                   |
| Prior Year, without stabilization      | 1.52%                         | 3.80%                    | 4.79%               | 4.14%                   |

The interest rates used to determine the PBGC variable-rate premium are the same as those used for funding, without reflecting funding stabilization. These interest rates are based on the plan sponsor’s election (an election that can next be changed in any following plan year) and are subject to the constraints established by law.

**Attachment to 2018 Schedule SB of Form 5500**  
**Schedule SB, Part V – Statement of Actuarial Assumptions/Methods**  
**Schlumberger Technology Corporation Pension Plan**  
**EIN 22-1692661 PN 007**

| <b>Mortality rates:</b>          | <p>The plan sponsor elected to delay the mortality regulations generally effective for the 2018 plan year to the 2019 plan year, as permitted under the regulations for eligible plan sponsors. As a result, the previously prescribed mortality is used:</p> <p>RP2000 separate annuitant and non-annuitant healthy mortality tables (sex-specific) with static projection using scale AA and no collar-adjustment. Mortality is projected from 2000 through the valuation date plus 7 years for annuitants, and through the valuation date plus 15 years for non-annuitants. This assumption is one of the choices allowed by the regulations.</p>                                                                                 |     |       |    |        |    |       |    |       |    |      |    |      |    |      |    |      |    |      |    |      |
|----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-------|----|--------|----|-------|----|-------|----|------|----|------|----|------|----|------|----|------|----|------|
| <b>Salary increases:</b>         | <p>4.00%.</p> <p>This assumption is based on historical and current data, adjusted to reflect advice from the sponsor, estimated future experience, and professional judgment.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |     |       |    |        |    |       |    |       |    |      |    |      |    |      |    |      |    |      |    |      |
| <b>Benefit election:</b>         | <p>All participants are assumed to elect the Normal Form of Benefit.</p> <p>This assumption is based on historical and current data, adjusted to reflect advice from the sponsor, estimated future experience, and professional judgment.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |     |       |    |        |    |       |    |       |    |      |    |      |    |      |    |      |    |      |    |      |
| <b>Sample termination rates:</b> | <p>For all divisions except Smith and Greybull:</p> <table border="1"> <thead> <tr> <th>Age</th><th>Rates</th></tr> </thead> <tbody> <tr><td>20</td><td>16.67%</td></tr> <tr><td>25</td><td>16.67</td></tr> <tr><td>30</td><td>13.00</td></tr> <tr><td>35</td><td>9.83</td></tr> <tr><td>40</td><td>7.00</td></tr> <tr><td>45</td><td>4.50</td></tr> <tr><td>50</td><td>2.17</td></tr> <tr><td>55</td><td>0.00</td></tr> <tr><td>60</td><td>0.00</td></tr> </tbody> </table> <p>For Smith and Greybull divisions, no pre-retirement termination is assumed.</p> <p>This assumption is based on historical and current data, adjusted to reflect advice from the sponsor, estimated future experience, and professional judgment.</p> | Age | Rates | 20 | 16.67% | 25 | 16.67 | 30 | 13.00 | 35 | 9.83 | 40 | 7.00 | 45 | 4.50 | 50 | 2.17 | 55 | 0.00 | 60 | 0.00 |
| Age                              | Rates                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |     |       |    |        |    |       |    |       |    |      |    |      |    |      |    |      |    |      |    |      |
| 20                               | 16.67%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |     |       |    |        |    |       |    |       |    |      |    |      |    |      |    |      |    |      |    |      |
| 25                               | 16.67                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |     |       |    |        |    |       |    |       |    |      |    |      |    |      |    |      |    |      |    |      |
| 30                               | 13.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |     |       |    |        |    |       |    |       |    |      |    |      |    |      |    |      |    |      |    |      |
| 35                               | 9.83                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |     |       |    |        |    |       |    |       |    |      |    |      |    |      |    |      |    |      |    |      |
| 40                               | 7.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |     |       |    |        |    |       |    |       |    |      |    |      |    |      |    |      |    |      |    |      |
| 45                               | 4.50                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |     |       |    |        |    |       |    |       |    |      |    |      |    |      |    |      |    |      |    |      |
| 50                               | 2.17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |     |       |    |        |    |       |    |       |    |      |    |      |    |      |    |      |    |      |    |      |
| 55                               | 0.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |     |       |    |        |    |       |    |       |    |      |    |      |    |      |    |      |    |      |    |      |
| 60                               | 0.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |     |       |    |        |    |       |    |       |    |      |    |      |    |      |    |      |    |      |    |      |

**Attachment to 2018 Schedule SB of Form 5500**  
**Schedule SB, Part V – Statement of Actuarial Assumptions/Methods**  
**Schlumberger Technology Corporation Pension Plan**  
**EIN 22-1692661 PN 007**

|                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |
|------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| <b>Retirement (from active and inactive status) rates:</b> | For all divisions except Smith and Greybull:                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |              |
|                                                            | <b>Age</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>Rates</b> |
|                                                            | 55-58                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 7.00%        |
|                                                            | 59                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 9.00         |
|                                                            | 60                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 12.00        |
|                                                            | 61                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 12.00        |
|                                                            | 62                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 25.00        |
|                                                            | 63                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 20.00        |
|                                                            | 64                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 20.00        |
|                                                            | 65                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 100.00       |
|                                                            | For Smith and Greybull divisions, 100% retirement is assumed at age 62.<br>This assumption is based on historical and current data, adjusted to reflect advice from the sponsor, estimated future experience, and professional judgment.                                                                                                                                                                                                                                                                                  |              |
| <b>Description of Weighted Average Retirement Age:</b>     | Age 61, determined as follows: The weighted-average retirement age for all divisions except Smith and Greybull is calculated as the sum of the product of each potential past or future retirement age times the probability of surviving to that age and then retiring at that age, assuming no other decrements. The weighted-average retirement age for Smith and Greybull divisions is age 62. The weighted-average retirement age for the total plan is the weighted average of these two averages, which is age 61. |              |
| <b>Retirement from terminated vested status:</b>           | Age 65                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |              |
| <b>Percent married:</b>                                    | For all divisions except Smith and Greybull: 80% for males, 60% for females. Spouse is assumed to be the opposite gender.<br>For Smith and Greybull divisions: 85% for males, 85% for females. Spouse is assumed to be the opposite gender.<br>This assumption is based on historical and current data, adjusted to reflect advice from the plan sponsor, estimated future experience, and professional judgment.                                                                                                         |              |
| <b>Age difference:</b>                                     | Male spouses are assumed to be three years older than female spouses.<br>This assumption is based on historical and current data, adjusted to reflect advice from the plan sponsor, estimated future experience, and professional judgment.                                                                                                                                                                                                                                                                               |              |

**Attachment to 2018 Schedule SB of Form 5500**  
**Schedule SB, Part V – Statement of Actuarial Assumptions/Methods**  
**Schlumberger Technology Corporation Pension Plan**  
**EIN 22-1692661 PN 007**

|                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|-----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Administrative expenses:</b>                                       | An expense assumption is required under the funding rules. Plan-related expenses of \$18,310,869 are expected to be paid by the plan during the year.<br>This assumption is based on the actual amount paid during the prior year.                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b>Active and Terminated Participants Over Normal Retirement Age:</b> | It is assumed that the plan sponsor has already reflected any required actuarial increases in the participant data provided for the valuation.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Asset method:</b>                                                  | As selected by the plan sponsor, assets are determined by averaging the market value as of the valuation date and the adjusted market values as of the preceding two years. The resulting value is limited to between 90% to 110% of market value of assets. The adjusted market values reflect cash flow and expected earnings to the valuation date. The expected earnings are based on an assumed rate of return of 7.25% (6.75% for former Smith and Greybull) for 2016 and 7.25% for 2017, not to exceed the applicable third segment rate of 6.65% for 2016 and 6.48% for 2017.                                                          |
| <b>Funding method:</b>                                                | Funding method is unit credit actuarial cost method, as prescribed by law. The liability is measured on an accrual-to-date basis using mandated mortality tables and interest rates with no salary projection past the end of the year.<br><br>If all assumptions are met (including the investment earnings implicitly assumed by the interest rate), funding the plan at the minimum required contribution level is generally designed to achieve a 100% funded status within seven years. Once that is achieved, or for overfunded plans, the required contribution will generally equal the target normal cost reduced by any overfunding. |
| <b>Assumption changes since prior valuation:</b>                      | None, other than the changes in the interest rate and mortality prescribed by law, as shown above.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |

|                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| <b>Form 5500</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security<br>Administration<br><br>Pension Benefit Guaranty Corporation | <b>Annual Return/Report of Employee Benefit Plan</b><br>This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).<br><br><b>Complete all entries in accordance with the instructions to the Form 5500.</b> | OMB Nos. 1210-0110<br>1210-0089<br><br><b>2018</b><br><br><b>This Form Is Open to Public Inspection</b> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|

|                                                                                                          |                                                                                                                                                                                                                                                                                                                                            |
|----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part I Annual Report Identification Information</b>                                                   |                                                                                                                                                                                                                                                                                                                                            |
| For calendar plan year 2018 or fiscal plan year beginning <u>01/01/2018</u> and ending <u>12/31/2018</u> |                                                                                                                                                                                                                                                                                                                                            |
| A This return/report is for:                                                                             | <input type="checkbox"/> a multiemployer plan <input type="checkbox"/> a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)<br><input checked="" type="checkbox"/> a single-employer plan <input type="checkbox"/> a DFE (specify) _____ |
| B This return/report is:                                                                                 | <input type="checkbox"/> the first return/report <input type="checkbox"/> the final return/report<br><input type="checkbox"/> an amended return/report <input type="checkbox"/> a short plan year return/report (less than 12 months)                                                                                                      |
| C If the plan is a collectively-bargained plan, check here: .....                                        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                   |
| D Check box if filing under:                                                                             | <input checked="" type="checkbox"/> Form 5558 <input type="checkbox"/> automatic extension <input type="checkbox"/> the DFVC program<br><input type="checkbox"/> special extension (enter description)                                                                                                                                     |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                        |     |                                  |            |                                                |            |                                           |              |                                            |        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----|----------------------------------|------------|------------------------------------------------|------------|-------------------------------------------|--------------|--------------------------------------------|--------|
| <b>Part II Basic Plan Information—enter all requested information</b>                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                        |     |                                  |            |                                                |            |                                           |              |                                            |        |
| <b>1a Name of plan</b><br>SCHLUMBERGER TECHNOLOGY CORPORATION PENSION PLAN<br><br><br><b>2a Plan sponsor's name (employer, if for a single-employer plan)</b><br>Mailing address (include room, apt., suite no. and street, or P.O. Box)<br>City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)<br>Schlumberger Technology Corporation<br><br>Schlumberger Regional Support Ctr<br>3600 Briarpark Dr., 3rd Floor, MD-4<br>Houston TX 77042 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="background-color: #f2f2f2;"><b>1b Three-digit plan number (PN)</b></td> <td style="text-align: center;">007</td> </tr> <tr> <td style="background-color: #f2f2f2;"><b>1c Effective date of plan</b></td> <td style="text-align: center;">01/01/1999</td> </tr> <tr> <td style="background-color: #f2f2f2;"><b>2b Employer Identification Number (EIN)</b></td> <td style="text-align: center;">22-1692661</td> </tr> <tr> <td style="background-color: #f2f2f2;"><b>2c Plan Sponsor's telephone number</b></td> <td style="text-align: center;">281-285-8500</td> </tr> <tr> <td style="background-color: #f2f2f2;"><b>2d Business code (see instructions)</b></td> <td style="text-align: center;">541990</td> </tr> </table> | <b>1b Three-digit plan number (PN)</b> | 007 | <b>1c Effective date of plan</b> | 01/01/1999 | <b>2b Employer Identification Number (EIN)</b> | 22-1692661 | <b>2c Plan Sponsor's telephone number</b> | 281-285-8500 | <b>2d Business code (see instructions)</b> | 541990 |
| <b>1b Three-digit plan number (PN)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 007                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                        |     |                                  |            |                                                |            |                                           |              |                                            |        |
| <b>1c Effective date of plan</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 01/01/1999                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                        |     |                                  |            |                                                |            |                                           |              |                                            |        |
| <b>2b Employer Identification Number (EIN)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 22-1692661                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                        |     |                                  |            |                                                |            |                                           |              |                                            |        |
| <b>2c Plan Sponsor's telephone number</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 281-285-8500                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                        |     |                                  |            |                                                |            |                                           |              |                                            |        |
| <b>2d Business code (see instructions)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 541990                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                        |     |                                  |            |                                                |            |                                           |              |                                            |        |

**Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.**

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

|                  |                                        |                  |                                                                                |
|------------------|----------------------------------------|------------------|--------------------------------------------------------------------------------|
| <b>SIGN HERE</b> | <br>Signature of plan administrator    | 10/14/19<br>Date | LORRAINE MAH<br>Enter name of individual signing as plan administrator         |
| <b>SIGN HERE</b> | <br>Signature of employer/plan sponsor | 10/14/19<br>Date | ANDREA SHAFFER<br>Enter name of individual signing as employer or plan sponsor |
| <b>SIGN HERE</b> | Signature of DFE                       | Date             | Enter name of individual signing as DFE                                        |

|                                                                                                                                                                                                                                                                                        |                                                                                                                                                                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor                                                                                                                                                                               | <b>3b</b> Administrator's EIN<br><br><b>3c</b> Administrator's telephone number<br><br><div style="background-color: #cccccc; height: 40px; width: 100%;"></div> |
| <b>4</b> If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:<br><b>a</b> Sponsor's name<br><b>c</b> Plan Name | <b>4b</b> EIN<br><br><b>4d</b> PN                                                                                                                                |
| <b>5</b> Total number of participants at the beginning of the plan year                                                                                                                                                                                                                | <b>5</b> 25,677                                                                                                                                                  |
| <b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ).                                                                                       |                                                                                                                                                                  |
| <b>a(1)</b> Total number of active participants at the beginning of the plan year .....                                                                                                                                                                                                | <b>6a(1)</b> 3,809                                                                                                                                               |
| <b>a(2)</b> Total number of active participants at the end of the plan year .....                                                                                                                                                                                                      | <b>6a(2)</b> 3,490                                                                                                                                               |
| <b>b</b> Retired or separated participants receiving benefits.....                                                                                                                                                                                                                     | <b>6b</b> 12,262                                                                                                                                                 |
| <b>c</b> Other retired or separated participants entitled to future benefits .....                                                                                                                                                                                                     | <b>6c</b> 7,762                                                                                                                                                  |
| <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> .....                                                                                                                                                                                                            | <b>6d</b> 23,514                                                                                                                                                 |
| <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. ....                                                                                                                                                                             | <b>6e</b> 1,800                                                                                                                                                  |
| <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> .....                                                                                                                                                                                                                                | <b>6f</b> 25,314                                                                                                                                                 |
| <b>g</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) .....                                                                                                                                        | <b>6g</b>                                                                                                                                                        |
| <b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested .....                                                                                                                                             | <b>6h</b> 0                                                                                                                                                      |
| <b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....                                                                                                                                                   | <b>7</b>                                                                                                                                                         |

**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:  
 1A 1E 3H

**b** If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

|                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>9a</b> Plan funding arrangement (check all that apply)<br><b>(1)</b> <input checked="" type="checkbox"/> Insurance<br><b>(2)</b> <input type="checkbox"/> Code section 412(e)(3) insurance contracts<br><b>(3)</b> <input checked="" type="checkbox"/> Trust<br><b>(4)</b> <input type="checkbox"/> General assets of the sponsor | <b>9b</b> Plan benefit arrangement (check all that apply)<br><b>(1)</b> <input checked="" type="checkbox"/> Insurance<br><b>(2)</b> <input type="checkbox"/> Code section 412(e)(3) insurance contracts<br><b>(3)</b> <input checked="" type="checkbox"/> Trust<br><b>(4)</b> <input type="checkbox"/> General assets of the sponsor |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**10** Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

**a Pension Schedules**

- (1)** ☒ **R** (Retirement Plan Information)
- (2)** ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3)** ☒ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

**b General Schedules**

- (1)** ☒ **H** (Financial Information)
- (2)** ☐ **I** (Financial Information – Small Plan)
- (3)** ☐ **A** (Insurance Information)
- (4)** ☐ **C** (Service Provider Information)
- (5)** ☒ **D** (DFE/Participating Plan Information)
- (6)** ☐ **G** (Financial Transaction Schedules)

**Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)**

**11a** If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

**11b** Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

**11c** Enter the Receipt Confirmation Code for the 2018 Form M-1 annual report. If the plan was not required to file the 2018 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code \_\_\_\_\_

|                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                    |                                                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| <b>SCHEDULE SB</b><br><b>(Form 5500)</b><br><br><small>Department of the Treasury<br/>Internal Revenue Service</small><br><br><small>Department of Labor<br/>Employee Benefits Security Administration<br/>Pension Benefit Guaranty Corporation</small> | <b>Single-Employer Defined Benefit Plan</b><br><b>Actuarial Information</b><br><br>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).<br><br><b>► File as an attachment to Form 5500 or 5500-SF.</b> | OMB No. 1210-0110<br><br><b>2018</b><br><br><b>This Form is Open to Public Inspection</b> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

► **Round off amounts to nearest dollar.**

► **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

|                                                                                                                                                         |                                                             |     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|-----|
| <b>A</b> Name of plan<br>SCHLUMBERGER TECHNOLOGY CORPORATION PENSION PLAN                                                                               | <b>B</b> Three-digit plan number (PN) ►                     | 007 |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF<br>SCHLUMBERGER TECHNOLOGY CORPORATION                                         | <b>D</b> Employer Identification Number (EIN)<br>22-1692661 |     |
| <b>E</b> Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B               |                                                             |     |
| <b>F</b> Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500 |                                                             |     |

|                                                                                                                                                                                                          |                            |                           |                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|---------------------------|--------------------------|
| <b>Part I Basic Information</b>                                                                                                                                                                          |                            |                           |                          |
| <b>1</b> Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2018</u>                                                                                                                        |                            |                           |                          |
| <b>2</b> Assets:                                                                                                                                                                                         |                            |                           |                          |
| a Market value.....                                                                                                                                                                                      | <b>2a</b>                  | 4,023,979,368             |                          |
| b Actuarial value .....                                                                                                                                                                                  | <b>2b</b>                  | 3,714,573,540             |                          |
| <b>3</b> Funding target/participant count breakdown                                                                                                                                                      | (1) Number of participants | (2) Vested Funding Target | (3) Total Funding Target |
| a For retired participants and beneficiaries receiving payment .....                                                                                                                                     | 13,799                     | 2,185,414,031             | 2,185,414,031            |
| b For terminated vested participants .....                                                                                                                                                               | 8,069                      | 375,592,105               | 375,592,105              |
| c For active participants .....                                                                                                                                                                          | 3,809                      | 578,971,131               | 624,101,763              |
| d Total .....                                                                                                                                                                                            | 25,677                     | 3,139,977,267             | 3,185,107,899            |
| <b>4</b> If the plan is in at-risk status, check the box and complete lines (a) and (b) <input type="checkbox"/>                                                                                         |                            |                           |                          |
| a Funding target disregarding prescribed at-risk assumptions .....                                                                                                                                       | <b>4a</b>                  |                           |                          |
| b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor ..... | <b>4b</b>                  |                           |                          |
| <b>5</b> Effective interest rate .....                                                                                                                                                                   | <b>5</b>                   | 5.72%                     |                          |
| <b>6</b> Target normal cost .....                                                                                                                                                                        | <b>6</b>                   | 60,075,300                |                          |

**Statement by Enrolled Actuary**  
 To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

|                  |                                                                                                                                                                                                                     |                                                                                                                          |
|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| <b>SIGN HERE</b> | Michael J. Marks<br>Signature of actuary<br>Michael J. Marks, FSA, MAAA<br>Type or print name of actuary<br>Sibson Consulting<br>Firm name<br>333 West 34th Street<br>New York NY 10001-2402<br>Address of the firm | 10/02/2019<br>Date<br>1706062<br>Most recent enrollment number<br>212-251-5000<br>Telephone number (including area code) |
|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

**For Paperwork Reduction Act Notice, see the Instructions for Form 5500 or 5500-SF.**

**Schedule SB (Form 5500) 2018**  
v. 171027

**Part II Beginning of Year Carryover and Prefunding Balances**

|                                                                                                                                                                     | (a) Carryover balance | (b) Prefunding balance |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|------------------------|
| <b>7</b> Balance at beginning of prior year after applicable adjustments (line 13 from prior year).....                                                             | 77,241,783            | 733,625,648            |
| <b>8</b> Portion elected for use to offset prior year's funding requirement (line 35 from prior year) .....                                                         | 57,557,791            | 0                      |
| <b>9</b> Amount remaining (line 7 minus line 8).....                                                                                                                | 19,683,992            | 733,625,648            |
| <b>10</b> Interest on line 9 using prior year's actual return of <u>18.21%</u> .....                                                                                | 3,584,455             | 133,593,231            |
| <b>11</b> Prior year's excess contributions to be added to prefunding balance:                                                                                      |                       |                        |
| <b>a</b> Present value of excess contributions (line 38a from prior year).....                                                                                      |                       | 0                      |
| <b>b(1)</b> Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.92%</u> ..... |                       | 0                      |
| <b>b(2)</b> Interest on line 38b from prior year Schedule SB, using prior year's actual return.....                                                                 |                       | 0                      |
| <b>c</b> Total available at beginning of current plan year to add to prefunding balance.....                                                                        |                       | 0                      |
| <b>d</b> Portion of (c) to be added to prefunding balance.....                                                                                                      |                       | 0                      |
| <b>12</b> Other reductions in balances due to elections or deemed elections.....                                                                                    | 0                     | 0                      |
| <b>13</b> Balance at beginning of current year (line 9 + line 10 + line 11d – line 12).....                                                                         | 23,268,447            | 867,218,879            |

**Part III Funding Percentages**

|                                                                                                                                                                            |           |         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------|
| <b>14</b> Funding target attainment percentage .....                                                                                                                       | <b>14</b> | 88.66%  |
| <b>15</b> Adjusted funding target attainment percentage.....                                                                                                               | <b>15</b> | 116.62% |
| <b>16</b> Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement ..... | <b>16</b> | 93.77%  |
| <b>17</b> If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage. ....                                        | <b>17</b> | %       |

**Part IV Contributions and Liquidity Shortfalls****18** Contributions made to the plan for the plan year by employer(s) and employees:

| (a) Date<br>(MM-DD-YYYY) | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees | (a) Date<br>(MM-DD-YYYY) | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees |
|--------------------------|-----------------------------------|---------------------------------|--------------------------|-----------------------------------|---------------------------------|
|                          |                                   |                                 |                          |                                   |                                 |
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|                          |                                   |                                 |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
| <b>Totals ▶</b>          |                                   |                                 | <b>18(b)</b>             | 0                                 | <b>18(c)</b> 0                  |

**19** Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

|                                                                                                                        |            |   |
|------------------------------------------------------------------------------------------------------------------------|------------|---|
| <b>a</b> Contributions allocated toward unpaid minimum required contributions from prior years.....                    | <b>19a</b> | 0 |
| <b>b</b> Contributions made to avoid restrictions adjusted to valuation date .....                                     | <b>19b</b> | 0 |
| <b>c</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date..... | <b>19c</b> | 0 |

**20** Quarterly contributions and liquidity shortfalls:

|                                                                                                                         |                                                                     |
|-------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| <b>a</b> Did the plan have a "funding shortfall" for the prior year?.....                                               | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>b</b> If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ..... | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>c</b> If line 20a is "Yes," see instructions and complete the following table as applicable:                         |                                                                     |

Liquidity shortfall as of end of quarter of this plan year

| (1) 1st | (2) 2nd | (3) 3rd | (4) 4th |
|---------|---------|---------|---------|
| 0       | 0       | 0       | 0       |

**Part V Assumptions Used to Determine Funding Target and Target Normal Cost**

|           |                                       |                                                     |                                                |                                                           |
|-----------|---------------------------------------|-----------------------------------------------------|------------------------------------------------|-----------------------------------------------------------|
| <b>21</b> | Discount rate:                        |                                                     |                                                |                                                           |
| <b>a</b>  | Segment rates:                        | 1st segment:<br>3.92 %                              | 2nd segment:<br>5.52 %                         | 3rd segment:<br>6.29 %                                    |
|           |                                       | <input type="checkbox"/> N/A, full yield curve used |                                                |                                                           |
| <b>b</b>  | Applicable month (enter code).....    | <b>21b</b>                                          | 4                                              |                                                           |
| <b>22</b> | Weighted average retirement age ..... | <b>22</b>                                           | 61                                             |                                                           |
| <b>23</b> | Mortality table(s) (see instructions) | Prior regulation:                                   | <input type="checkbox"/> Prescribed - combined | <input checked="" type="checkbox"/> Prescribed - separate |
|           |                                       | Current regulation:                                 | <input type="checkbox"/> Prescribed - combined | <input type="checkbox"/> Prescribed - separate            |
|           |                                       |                                                     | <input type="checkbox"/> Substitute            | <input type="checkbox"/> Substitute                       |

**Part VI Miscellaneous Items**

|           |                                                                                                                                                              |                                         |                                        |
|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------|
| <b>24</b> | Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. .... | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| <b>25</b> | Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ....                                      | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| <b>26</b> | Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ....                            | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| <b>27</b> | If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment .....                                   | <b>27</b>                               |                                        |

**Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years**

|           |                                                                                                                            |           |   |
|-----------|----------------------------------------------------------------------------------------------------------------------------|-----------|---|
| <b>28</b> | Unpaid minimum required contributions for all prior years .....                                                            | <b>28</b> | 0 |
| <b>29</b> | Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a) ..... | <b>29</b> | 0 |
| <b>30</b> | Remaining amount of unpaid minimum required contributions (line 28 minus line 29) .....                                    | <b>30</b> | 0 |

**Part VIII Minimum Required Contribution For Current Year**

|           |                                                                                                                                                                            |                     |                    |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|
| <b>31</b> | Target normal cost and excess assets (see instructions):                                                                                                                   |                     |                    |
| <b>a</b>  | Target normal cost (line 6) .....                                                                                                                                          | <b>31a</b>          | 60,075,300         |
| <b>b</b>  | Excess assets, if applicable, but not greater than line 31a .....                                                                                                          | <b>31b</b>          | 0                  |
| <b>32</b> | Amortization installments:                                                                                                                                                 | Outstanding Balance | Installment        |
| <b>a</b>  | Net shortfall amortization installment .....                                                                                                                               | 361,021,684         | 58,936,542         |
| <b>b</b>  | Waiver amortization installment .....                                                                                                                                      | 0                   | 0                  |
| <b>33</b> | If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount ..... | <b>33</b>           |                    |
| <b>34</b> | Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)....                                                           | <b>34</b>           | 119,011,842        |
|           |                                                                                                                                                                            | Carryover balance   | Prefunding balance |
| <b>35</b> | Balances elected for use to offset funding requirement .....                                                                                                               | 23,268,447          | 95,743,395         |
| <b>36</b> | Additional cash requirement (line 34 minus line 35) .....                                                                                                                  | <b>36</b>           | 0                  |
| <b>37</b> | Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) .....                                                  | <b>37</b>           | 0                  |
| <b>38</b> | Present value of excess contributions for current year (see instructions)                                                                                                  |                     |                    |
| <b>a</b>  | Total (excess, if any, of line 37 over line 36) .....                                                                                                                      | <b>38a</b>          | 0                  |
| <b>b</b>  | Portion included in line 38a attributable to use of prefunding and funding standard carryover balances .....                                                               | <b>38b</b>          | 0                  |
| <b>39</b> | Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) .....                                                                      | <b>39</b>           | 0                  |
| <b>40</b> | Unpaid minimum required contributions for all years .....                                                                                                                  | <b>40</b>           | 0                  |

**Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)**

|           |                                                                         |                                                                                                                         |
|-----------|-------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|
| <b>41</b> | If an election was made to use PRA 2010 funding relief for this plan:   |                                                                                                                         |
| <b>a</b>  | Schedule elected .....                                                  | <input type="checkbox"/> 2 plus 7 years <input type="checkbox"/> 15 years                                               |
| <b>b</b>  | Eligible plan year(s) for which the election in line 41a was made ..... | <input type="checkbox"/> 2008 <input type="checkbox"/> 2009 <input type="checkbox"/> 2010 <input type="checkbox"/> 2011 |

**Attachment to 2018 Schedule SB of Form 5500**  
**Schedule SB, Line 22 – Description of Weighted Average Retirement Age**  
**Schlumberger Technology Corporation Pension Plan**  
**EIN 22-1692661 PN 007**

The weighted-average retirement age for all divisions except Smith and Greybull is calculated as the sum of the product of each potential past or future retirement age times the probability of surviving to that age and then retiring at that age, assuming no other decrements.

For all divisions except Smith and Greybull:

| Age          | Rate of Retirement | Lx     | Number of Retirements | Number of Retirements * Age |
|--------------|--------------------|--------|-----------------------|-----------------------------|
| 55           | 7.00%              | 10,000 | 700                   | 38,500                      |
| 56           | 7.00               | 9,300  | 651                   | 36,456                      |
| 57           | 7.00               | 8,649  | 605                   | 34,510                      |
| 58           | 7.00               | 8,044  | 563                   | 32,657                      |
| 59           | 9.00               | 7,481  | 673                   | 39,722                      |
| 60           | 12.00              | 6,807  | 817                   | 49,012                      |
| 61           | 12.00              | 5,990  | 719                   | 43,850                      |
| 62           | 25.00              | 5,272  | 1,318                 | 81,709                      |
| 63           | 20.00              | 3,954  | 791                   | 49,816                      |
| 64           | 20.00              | 3,163  | 633                   | 40,486                      |
| 65           | 100.00             | 2,530  | 2,530                 | 164,472                     |
| <b>Total</b> |                    |        | <b>10,000</b>         | <b>611,190</b>              |

For Smith and Greybull divisions, 100% retirement is assumed at age 62.

*The weighted average retirement age is equal to the total (Number of Retirements \* Age) divided by the total number of retirements, rounded to the nearest integral age.*

**Weighted Average Retirement Age for All Divisions Except Smith and Greybull: 61.12**  
**Weighted Average Retirement Age for Smith and Greybull Divisions: 62**  
**Overall Weighted Average Retirement Age: 61**

**Attachment to 2018 Schedule SB of Form 5500**  
**Schedule SB, Part V – Summary of Plan Provisions**  
**Schlumberger Technology Corporation Pension Plan**  
**EIN 22-1692661 PN 007**

**Summary of Plan Provisions**

This subsection summarizes the major provisions of the Plan as included in the valuation. It is not intended to be, nor should it be interpreted as, a complete statement of all plan provisions.

| <b>ALL DIVISIONS EXCEPT SMITH AND GREYBULL</b>                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|---------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>PLAN STATUS: CLOSED TO NEW HIRES EFFECTIVE OCTOBER 1, 2004</b>               |                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>Normal retirement:</b>                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Age requirement:                                                                | 65                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Service requirement:                                                            | None                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Amount:                                                                         | For each year of participation beginning January 1, 1989 (January 1, 2002 for WesternGeco participants), 1.5% of admissible compensation for the first 15 years of service plus 2% of admissible compensation for service after 15 years. Benefits for service before January 1, 1989 are based on prior plans in effect. Career average benefits were updated on January 1, 1993, January 1, 1996, January 1, 2000, and January 1, 2005.                  |
| Minimum benefit                                                                 | A minimum benefit is provided under the Plan for participants retiring directly from active service. For employees with at least 30 years of active service with the Company, the minimum annual benefit is 20% of the average of the highest five consecutive years of admissible annual compensation during the last ten years of service with the Company. The minimum benefit is reduced proportionately based on total service if less than 30 years. |
| Special provisions for former participants of Thorn EMI (USA) Inc. Pension Plan | The accrued benefit for service prior to January 1, 1996 is based on the frozen benefit under the Thorn EMI plan determined as of December 31, 1995. Eligibility for normal retirement for this portion of the total benefit is age 65 and 5 years of service.                                                                                                                                                                                             |
| Special provisions for former participants of Camco Pension Plan                | The accrued benefit for service prior to January 1, 2000 is based on the frozen benefit under the Camco Pension Plan determined as of December 31, 1999. Eligibility age for normal retirement is 65. The normal form of payment is a 10 year certain and life annuity.                                                                                                                                                                                    |
| <b>Early retirement:</b>                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Age requirement:                                                                | 55                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Service requirement:                                                            | None                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Amount:                                                                         | Normal retirement pension accrued reduced by 1/3% for each of the first 60 months and 1/4% for each of the next 60 months prior to age 65.<br>Not applicable to benefits accrued as of December 31, 1995 under the Thorn EMI (USA) Inc. Pension Plan.                                                                                                                                                                                                      |

**Attachment to 2018 Schedule SB of Form 5500**  
**Schedule SB, Part V – Summary of Plan Provisions**  
**Schlumberger Technology Corporation Pension Plan**  
**EIN 22-1692661 PN 007**

|                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Early retirement for accrued benefits under the Thorn EMI (USA) Inc. Pension Plan:</b>          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Age requirement:                                                                                   | 55                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Service requirement:                                                                               | 5 years                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Amount:                                                                                            | The December 31, 1995 frozen benefit accrued under the Thorn EMI plan, is actuarially reduced for early commencement. The actuarial equivalent basis is the 1951 Group Annuity Mortality Table for males, projected to 1970 by Scale C, with a five-year age setback, and 6% interest.                                                                                                                                                                                                                                                                                        |
| <b>Early retirement for accrued benefits as of December 31, 1999 under the Camco Pension Plan:</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Age requirement:                                                                                   | 55                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Service requirement:                                                                               | 5 years                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Amount:                                                                                            | The December 31, 1999 frozen benefit accrued under the Camco Pension Plan reduced by 5% per year for each year that the participant retires prior to Normal Retirement Date.<br>Additionally, a supplemental benefit is payable to TRW employees who were participants in the TRW Plan, were not eligible for early retirement under the TRW Plan but are eligible for early retirement under the Camco Plan. Such employees will receive an additional benefit in the amount of the difference between the TRW deferred vested benefit and the TRW early retirement benefit. |
| <b>Special early retirement:</b>                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Age requirement:                                                                                   | 50                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Service requirement:                                                                               | 20 years                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Amount:                                                                                            | Normal retirement pension accrued reduced by 4% times the excess of 85 over total points, where total points equal age plus service. For the purpose of determining such points, service considered may not exceed 30. There is no reduction if participant is at least age 55 and the sum of age plus service equals or exceeds 85.<br>For Geco Prakla participants, service with Schlumberger prior to January 1, 2002 will be counted for this purpose.<br>Not applicable to benefits accrued as of December 31, 1995 under the Thorn EMI (USA) Inc. Pension Plan.         |
| <b>Vesting:</b>                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Age and service requirement:                                                                       | Earlier of age 50 or 5 years of active service                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Amount:                                                                                            | Normal retirement pension accrued payable at age 65 or as early age 55 based on standard early retirement reductions.                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Vesting percentage:                                                                                | 100% after 5 years of service                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

**Attachment to 2018 Schedule SB of Form 5500**  
**Schedule SB, Part V – Summary of Plan Provisions**  
**Schlumberger Technology Corporation Pension Plan**  
**EIN 22-1692661 PN 007**

|                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Pre-retirement death benefits:</b>                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Age:                                                                                               | None                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Service requirement:                                                                               | 5 years                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Amount:                                                                                            | 50% of benefit employee would have received had he retired the day before he died and elected the joint and survivor option payable immediately. If employee was younger than age 55 at the time of death, the amount payable is the actuarial equivalent of the benefit that would have been payable at age 55. No actuarial reduction is made for conversion to the joint and survivor option.                                                                                                                                                  |
| Special provisions for former participants of Thorn EMI (USA) Inc. Pension Plan                    | For service accrued before January 1, 1996 in the Thorn EMI plan, 50% of the December 31, 1995 frozen benefit under the Thorn EMI plan employee would have received had he terminated employment the day before he died and elected the joint and survivor option payable at age 55.                                                                                                                                                                                                                                                              |
| Special provisions for former Camco employees                                                      | For service accrued before December 31, 1999 in the Camco plan, a lump sum in the amount of the present value of the accrued benefit as of the participant's date of death unless the actuarial equivalent value of the Qualified Preretirement Survivor Annuity is greater. In this case, 50% of the benefit that would have been payable had the participant terminated employment on his date of death, survived to earliest retirement age and elected a qualified joint and survivor form of payment is payable to the participant's spouse. |
| <b>Post-retirement death benefits:</b>                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Joint and Survivor:                                                                                | If married, pension benefits are paid in the form of a joint and survivor annuity unless this form is rejected by employee and spouse. If not rejected, the benefit amount otherwise payable is reduced to reflect the joint and survivor coverage. If rejected, or if not married, benefits are payable for the life of the employee without reduction or in any available optional form elected by the employee in an actuarially equivalent amount.                                                                                            |
| <b>Post-retirement death benefit for former participants of Thorn EMI (USA) Inc. Pension Plan:</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|                                                                                                    | Same as above, except actuarial equivalence reduction for portion of benefit accrued prior to January 1, 1996 is made in accordance with the Thorn EMI plan (1951 Group Annuity Mortality Table for males, projected to 1970 by Scale C, with a five-year age setback, and 6% interest).                                                                                                                                                                                                                                                          |
| <b>Post-retirement death benefit for former participants of Camco Pension Plan:</b>                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|                                                                                                    | Same as above, except actuarial equivalence reduction for portion of benefit accrued prior to January 1, 2000 is made in accordance with the Camco plan (1971 Group Annuity Mortality Table for males and 6% interest).                                                                                                                                                                                                                                                                                                                           |

**Attachment to 2018 Schedule SB of Form 5500**  
**Schedule SB, Part V – Summary of Plan Provisions**  
**Schlumberger Technology Corporation Pension Plan**  
**EIN 22-1692661 PN 007**

|                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Participation:</b>         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Age requirement:              | None                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Service requirement:          | One year<br>For WesternGeco participants, January 1, 2002 or one year of service if hired after January 1, 2002                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Former Thorn EMI participants | Participation commences January 1, 1996                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Neponset employees            | Participation commences January 1, 1996                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Oilfield employees            | From 1/1/94 or date of participation, if later, with an offset for the 1994 benefit which is paid by the plan from which an employee transferred.<br>All others: From date of participation.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>Service:</b>               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Vesting:                      | All years of employment are credited                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Benefit:                      | From date of participation (January 1, 2002 for WesternGeco participants)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>Forms of Benefit:</b>      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Normal Form:                  | Life annuity, unless participant is married, then actuarially reduced joint and 50% survivor annuity.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Optional Forms:               | Joint and 50%, 60%, 75%, or 100% survivor (with any beneficiary)<br>Life with 5, 10, 15, or 20 years certain<br>Social Security leveling option<br>Lump sum if the amount is \$30,000 or less                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Actuarial Equivalence:        | For purposes of converting a life annuity to an optional form of benefit (excluding lump sums), actuarial equivalence is based on a 7.00% interest rate and the 1984 Unisex Pension Mortality Table rated back three years.<br><br>For purposes of converting a life annuity to an optional form of benefit (excluding lump sums) for frozen benefits accrued under the Thorn EMI plan, actuarial equivalence is based on a 6.00% interest rate and the 1951 Group Annuity Mortality Table for males, projected to 1970 by Scale C, with a five-year age setback.<br><br>For purposes of converting a life annuity to an optional form of benefit (excluding lump sums) for frozen Camco benefits, actuarial equivalence is based on a 6.00% interest rate and the 1971 Group Annuity Mortality Table for males.<br><br>For purposes of calculating lump sums, actuarial equivalence is based on the assumptions specified in IRC Section 417(e), including reflecting the yield curve in effect for the November preceding the year of calculation. |

**Attachment to 2018 Schedule SB of Form 5500**  
**Schedule SB, Part V – Summary of Plan Provisions**  
**Schlumberger Technology Corporation Pension Plan**  
**EIN 22-1692661 PN 007**

|                                                                               |                                                                                                                                                                                                                                                                                                                                                   |
|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>SMITH DIVISION (FORMER SMITH INTERNATIONAL INC. RESTATED PENSION PLAN)</b> |                                                                                                                                                                                                                                                                                                                                                   |
| <b>PLAN STATUS: FROZEN EFFECTIVE MARCH 1, 1987</b>                            |                                                                                                                                                                                                                                                                                                                                                   |
| <b>Normal retirement:</b>                                                     |                                                                                                                                                                                                                                                                                                                                                   |
| Age requirement:                                                              | 65                                                                                                                                                                                                                                                                                                                                                |
| Service requirement:                                                          | None                                                                                                                                                                                                                                                                                                                                              |
| Amount:                                                                       | Frozen benefits provided by the plan sponsor                                                                                                                                                                                                                                                                                                      |
| <b>Early retirement:</b>                                                      |                                                                                                                                                                                                                                                                                                                                                   |
| Age requirement:                                                              | 55                                                                                                                                                                                                                                                                                                                                                |
| Service requirement:                                                          | 10 years                                                                                                                                                                                                                                                                                                                                          |
| Amount:                                                                       | The accrued Normal Retirement benefit reduced 3% per year for each year prior to 65 that is between 60 and 65, and 5% per year for each year between 55 and 60.                                                                                                                                                                                   |
| <b>Vesting:</b>                                                               |                                                                                                                                                                                                                                                                                                                                                   |
| Age requirement:                                                              | None                                                                                                                                                                                                                                                                                                                                              |
| Service requirement:                                                          | 5 years                                                                                                                                                                                                                                                                                                                                           |
| <b>Pre-retirement death benefits:</b>                                         |                                                                                                                                                                                                                                                                                                                                                   |
| Age requirement:                                                              | None                                                                                                                                                                                                                                                                                                                                              |
| Service requirement:                                                          | 5 years                                                                                                                                                                                                                                                                                                                                           |
| Amount:                                                                       | If employee is age 55 or older, benefit is 50% of the early retirement benefit payable in the form of a 50% joint and survivor annuity. If the employee is younger than age 55, benefit is to commence when employee would have reached age 55 and is equal to 50% of the age 55 benefit payable in the form of a 50% joint and survivor annuity. |
| <b>Forms of Benefit:</b>                                                      |                                                                                                                                                                                                                                                                                                                                                   |
| Normal Form:                                                                  | Life annuity, unless participant is married, then actuarially reduced joint and 50% survivor annuity.                                                                                                                                                                                                                                             |

**Attachment to 2018 Schedule SB of Form 5500**  
**Schedule SB, Part V – Summary of Plan Provisions**  
**Schlumberger Technology Corporation Pension Plan**  
**EIN 22-1692661 PN 007**

|                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                   |
|------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>GREYBULL DIVISION (FORMER M-I L.L.C. PENSION PLAN FOR CERTAIN COLLECTIVE BARGAINING UNITS OF M-I MINERALS OPERATIONS)</b> |                                                                                                                                                                                                                                                                                                                                                   |
| <b>PLAN STATUS: FROZEN EFFECTIVE AUGUST 31, 1998</b>                                                                         |                                                                                                                                                                                                                                                                                                                                                   |
| <b>Normal retirement:</b>                                                                                                    |                                                                                                                                                                                                                                                                                                                                                   |
| Age requirement:                                                                                                             | 65                                                                                                                                                                                                                                                                                                                                                |
| Service requirement:                                                                                                         | None                                                                                                                                                                                                                                                                                                                                              |
| Amount:                                                                                                                      | Frozen benefits provided by the plan sponsor                                                                                                                                                                                                                                                                                                      |
| <b>Early retirement:</b>                                                                                                     |                                                                                                                                                                                                                                                                                                                                                   |
| Age requirement:                                                                                                             | 55                                                                                                                                                                                                                                                                                                                                                |
| Service requirement:                                                                                                         | 10 years                                                                                                                                                                                                                                                                                                                                          |
| Amount:                                                                                                                      | A monthly benefit payable for life equal to the accrued benefit reduced on an actuarially equivalent basis for each month that commencement of payments precedes the participant's normal retirement date.                                                                                                                                        |
| <b>Vesting:</b>                                                                                                              |                                                                                                                                                                                                                                                                                                                                                   |
| Age requirement:                                                                                                             | None                                                                                                                                                                                                                                                                                                                                              |
| Service requirement:                                                                                                         | 5 years                                                                                                                                                                                                                                                                                                                                           |
| <b>Pre-retirement death benefits:</b>                                                                                        |                                                                                                                                                                                                                                                                                                                                                   |
| Age requirement:                                                                                                             | None                                                                                                                                                                                                                                                                                                                                              |
| Service requirement:                                                                                                         | 5 years                                                                                                                                                                                                                                                                                                                                           |
| Amount:                                                                                                                      | If employee is age 55 or older, benefit is 50% of the early retirement benefit payable in the form of a 50% joint and survivor annuity. If the employee is younger than age 55, benefit is to commence when employee would have reached age 55 and is equal to 50% of the age 55 benefit payable in the form of a 50% joint and survivor annuity. |
| <b>Forms of Benefit:</b>                                                                                                     |                                                                                                                                                                                                                                                                                                                                                   |
| Normal Form:                                                                                                                 | Life annuity, unless participant is married, then actuarially reduced joint and 50% survivor annuity.                                                                                                                                                                                                                                             |
| <b>Statutory Limits:</b>                                                                                                     |                                                                                                                                                                                                                                                                                                                                                   |
| <b>Section 415 limit:</b>                                                                                                    | \$220,000 (previously \$215,000)                                                                                                                                                                                                                                                                                                                  |
| <b>Section 401(a)(17) limit:</b>                                                                                             | \$275,000 (previously \$270,000)                                                                                                                                                                                                                                                                                                                  |

**Attachment to 2018 Schedule SB of Form 5500**  
**Schedule SB, Part V – Summary of Plan Provisions**  
**Schlumberger Technology Corporation Pension Plan**  
**EIN 22-1692661 PN 007**

**Recent Plan Amendments**

| <b>Plan Amendment</b>                                                                                                                                                                         | <b>Effective Date</b> | <b>Reflected in 2018 Actuarial Valuation</b> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|----------------------------------------------|
| 1. Mergers with the Smith International, Inc. Restated Pension Plan ("Smith") and the M-I L.L.C. Pension Plan for Certain Collective Bargaining Units of M-I Minerals Operations ("Greybull") | December 31, 2016     | Yes                                          |
| 2. Merger with Schlumberger Limited Pension Plan                                                                                                                                              | December 31, 2015     | Yes                                          |
| 3. Merger with WesternGeco Pension Plan                                                                                                                                                       | January 1, 2011       | Yes                                          |
| 4. Pensioner cost of living update                                                                                                                                                            | July 1, 2010          | Yes                                          |
| 5. Change in vesting rules and added 60% J&S option                                                                                                                                           | January 1, 2009       | Yes                                          |
| 6. Pensioner increase and career pay update for actives                                                                                                                                       | January 1, 2005       | Yes                                          |
| 7. Sale of Global-Tel-Link & part of Network Solutions                                                                                                                                        | December 31, 2004     | Yes                                          |
| 8. Establishment of enhanced DC plan for new actives, 9 option to switch to DC for existing employees                                                                                         | October 1, 2004       | Yes                                          |
| 9. Sale of Electricity                                                                                                                                                                        | July 1, 2004          | Yes                                          |
| 10. Sale of Cards & Malco                                                                                                                                                                     | May 19, 2004          | Yes                                          |
| 11. Early retirement window                                                                                                                                                                   | March 2004            | Yes                                          |
| 12. Sale of Sema Utilities & Sema Telecom                                                                                                                                                     | January 30, 2004      | Yes                                          |
| 13. Benefits for Drill Bits and NP Test employees were frozen                                                                                                                                 | December 31, 2002     | Yes                                          |
| 14. EGTRRA limits, including the \$200,000 compensation limit prospectively only                                                                                                              | January 1, 2002       | Yes                                          |
| 15. Merger with Omnes and Camco                                                                                                                                                               | January 1, 2000       | Yes                                          |
| 16. Career pay update for active employees and an increase in the threshold below which elective lump sums are payable from \$10,000 to \$30,000                                              | January 1, 2000       | Yes                                          |
| 17. Pensioner cost of living update                                                                                                                                                           | January 1, 1998       | Yes                                          |
| 18. Early retirement window                                                                                                                                                                   | December 1998         | Yes                                          |

Attachment to 2018 Schedule SB of Form 5500  
Schedule SB, Line 32 – Schedule of Amortization Bases  
Schlumberger Technology Corporation Pension Plan  
EIN 22-1692661 PN 007

**SCHEDULE OF SHORTFALL AMORTIZATION BASES AS OF JANUARY 1, 2018**

| Year Established | Original Base | Present Value<br>of Remaining<br>Installments | Years Remaining | Shortfall<br>Amortization<br>Installment |
|------------------|---------------|-----------------------------------------------|-----------------|------------------------------------------|
| 2018             | \$361,021,684 | \$361,021,684                                 | 7               | \$58,936,542                             |
| <b>Total</b>     |               | <b>\$361,021,684</b>                          |                 | <b>\$58,936,542</b>                      |