Edgar Filing: Jacobson William B - Form 4

Jacobson Will Form 4	iam B										
April 11, 201	1										
									OMB AF	OMB APPROVAL	
UNITED STATES SECURITIES AN Washington, I									Number:	3235-0287	
if no longe subject to Section 16 Form 4 or Form 5 obligations may contin <i>See</i> Instruct 1(b).	Filed prospective.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section							Expires: January 31, 2005 Estimated average burden hours per response 0.5		
(Print or Type Re	esponses)										
1. Name and Ad Jacobson Wil	2. Issuer Name and Ticker or Trading Symbol Weatherford International Ltd./Switzerland [WFT]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Mc				3. Date of Earliest Transaction (Month/Day/Year) 04/07/2011				Director 10% Owner X Officer (give title Other (specify below) VP, Co-Gen Coun & CCO			
				nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
WASHINGT	ON, DC 2000	4						Form filed by M Person			
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	ecuri	ties Acqu	iired, Disposed of,	, or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ar) Execution any	emed on Date, if /Day/Year)	3. Transactic Code (Instr. 8) Code V	4. Securi on(A) or Di (Instr. 3, Amount	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Registered Shares	04/07/2011			F <u>(1)</u>	8,613	D	\$ 21.79	137,115	D		

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Titl		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	Date	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day,	/Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
, í	Derivative		· · · ·	· · · ·	Securities			(Instr.	3 and 4)	. ,	Owne
	Security				Acquired			(Follo
	Security				(A) or						Repo
					Disposed						Trans
					-						
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or Number		
						Exercisable	Date		Number		
				<i>a</i>					of		
				Code V	(A) (D)				Shares		
_											

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Jacobson William B 801 PENNSYLVANIA AVE, NW 5TH FLOOR WASHINGTON, DC 20004			VP, Co-Gen Coun & CCO				
Signatures							
Joseph C. Henry, by Power of Attorney		04/11/2011					
**Signature of Reporting Person		Date					

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Transaction was a withholding of a portion of vested restricted share units to satisfy the reporting person's tax withholding obligations upon vesting, pursuant to the award agreement and associated equity incentive plan under which the award was granted.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.