## Edgar Filing: MILLER MERRILL A JR - Form 4

MILLER ME	RRILL A JR											
Form 4	0011											
November 30												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							т	OMB APPROVAL				
	UNIII			hington,			IGE V		OMB Number:	3235-0287		
Check this			vv a5	inington,	D.C. 20.	<b>//</b>				January 31,		
if no longer subject to STATEMENT OF CHANG				GES IN I	BENEFI	CIA	LOW	NERSHIP OF	Expires:	2005		
subject to				SECURITIES					Estimated average burden hours per			
Form 4 or										response 0.5		
Form 5	Filed	pursuant to	Section 16	6(a) of the	e Securiti	es Ex	chang	ge Act of 1934,	•			
obligation may contin		17(a) of the	Public Ut	ility Hold	ling Com	pany	Act o	f 1935 or Sectio	n			
See Instruc		30(h)	) of the Inv	vestment	Company	y Act	of 19	40				
1(b).												
	`											
(Print or Type R	esponses)											
1 Name and Ac	dress of Report	ing Person *	2 Jacuar	Nama and	Tielsen on '	Fradin	~	5. Relationship of	f Reporting Per	son(s) to		
1. Name and Address of Reporting Person *2. IssuerMILLER MERRILL A JRSymbol				r Name and Ticker or Trading NAL OILWELL VARCO OV1				Issuer	r Reporting I er	3011(3) 10		
INC [N								(Check all applicable)				
(Last)	(First)	(Middle)	-	-	maastion			X Director	100	owner		
				e of Earliest Transaction n/Day/Year)				X Officer (give title Other (specify				
7909 PARKV	WOOD CIRC	CLE	11/30/20	-				below)	below) sident and CEO			
DRIVE			11,00,20					Ples				
	(Street)		4 If Amer	ndment Dat	te Original			6 Individual or I	oint/Groun Fili	10(Check		
· · · · · · · · · · · · · · · · · · ·				If Amendment, Date Original led(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
			× ×									
HOUSTON,	TX 77036							Form filed by M Person	More than One Re	eporting		
(City)	(State)	(Zip)										
(eng)	(Build)	(EIP)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction			3.	4. Securi			5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Y	any	on Date, if TransactionAcquired (A) or Code Disposed of (D)					Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(11011-0)			/Day/Year) (Instr. 8) (Instr. 3, 4 and 5)			Owned		Ownership				
								Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
				Cada V	A	or	D.::	(Instr. 3 and 4)				
Common				Code V		(D)	Price					
Stock	11/30/2011			$G^{(1)}$	2,000	D	\$0	598,404	D			
Stovic												

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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
Terformig o miner i anne i rian oss	Director	10% Owner	Officer	Other			
MILLER MERRILL A JR 7909 PARKWOOD CIRCLE DRIVE HOUSTON, TX 77036	Х		President and CEO				
Signatures							
By: Raymond W. Chang For: Merrill A Miller, Jr.	A. 11/30/2011						
<u>**</u> 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 voluntarily reported earlier than required.

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.