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WEATHER Form 4 April 03, 20	RFORD INTERNA	ATIONAI	L LTD							
FORM	ЛД								PPROVAL	
	UNITED	STATES		RITIES A shington			COMMISSION	N OMB Number:	3235-0287 January 31,	
Check t if no loi subject Section Form 4	to STATEN 16.	STATEMENT OF CHANGES IN I SECUR								
Form 5 obligati may con <i>See</i> Inst 1(b).	ons ntinue. Section 17((a) of the	o Section 16(a) of the Securities Exchange Act of 1934, e Public Utility Holding Company Act of 1935 or Section a) of the Investment Company Act of 1940						. 0.5	
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> NICHOLSON JON R			2. Issuer Name and Ticker or Trading Symbol WEATHERFORD INTERNATIONAL LTD [WFT]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (Middle)		of Earliest T		[,,,,,]	Director		% Owner	
515 POST OAK. BLVD., STE. 600			(Month/Day/Year) 03/31/2006			XOfficer (give titleOther (specify below) below) Sr VP Human Resources				
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
HOUSTON	N, TX 77027						Form filed by Person	More than One R	eporting	
(City)	(State)	(Zip)	Tat	ole I - Non-l	Derivative	Securities A	cquired, Disposed of	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8)	Disposed	(A) or of (D)	Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D) Price	Transaction(s) (Instr. 3 and 4)			
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	-	-	-			
					inforn requii	nation cont ed to respo lys a curre	spond to the colle ained in this form ond unless the for ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pric
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onof Derivative	Expiration Date	Underlying Securities	Deriva
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Securi

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquire (A) or Dispose (D) (Instr. 3 and 5)	d of					(Instr.
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	<u>(1)</u>	03/31/2006		А	875		(2)	(2)	Common Shares	875	\$ 43
Phantom Stock Units	<u>(1)</u>	03/31/2006		А	1,750		(2)	(2)	Common Shares	1,750	\$

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
NICHOLSON JON R 515 POST OAK. BLVD., STE. 600 HOUSTON, TX 77027			Sr VP Human Resources			
Signatures						

Date

Signatures

Burt M. Martin, by Power of	04/03/2006
Attorney	04/03/2000

**Signature of Reporting Person

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) The phantom stock units convert to common shares on a one-for-one basis.

All phantom stock units credited under the Company's Executive Deferred Compensation Stock Ownership Plan (the "Plan") with respect to deferrals by a participant are 100% vested at all times. All units credited under the Plan with respect to the Company's 7.5% allocation

(2) to deferring by a participant are 100% vested at an anos. An anis electrical and r the Filan with respect to the Company's 7.5% anotes and matching allocation vest at 20% per year for each year of service. Distributions under the Plan are made upon termination of employment, retirement or death of the participant.

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.