FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington,	D.C.	20549	

	OMB APPI	ROVAL
l	OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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1. Name and Address of Reporting Person* BROWN ERIC B								er or Trac				5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last)		rst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/19/2007								X Officer below)	Officer (give title below) Sr.VP, Gen Cour		Other (s	specify
(Street) HOUSTON TX 77046					- 4. l	4. If Amendment, Date of Original Filed (Month/Day/Year) 5. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting										n		
(City)	(S	tate)	(Zip)											Persor	1			
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D				saction	2A. Deemed Execution Date,			Code (Instr. 5)			d (A) or	or 5. Amount of			Direct I Indirect E tr. 4)	'. Nature of ndirect Beneficial Ownership Instr. 4)		
								Code	v	Amount	(A) or (D)	Price	Transacti (Instr. 3 a	on(s)				
Ordinary Shares 03/			03/1	9/200	/2007		A ⁽¹⁾		7,260	A	(1)	39,	39,626		D			
Ordinary	dinary Shares		03/19	9/200	/2007		F ⁽³⁾		883	D	(3)	38,	38,743		D			
Ordinary Shares													34	4 5		I S	By Issuer Employee Stock Purchase Plan	
		-	Table II -							•	osed of, onvertib			/ Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisa Expiration Date (Month/Day/Yea		•	7. Title an Amount o Securities Underlyin Derivative (Instr. 3 an	f g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares					
Stock Ontions	\$56.34	03/19/2007			A		12,929		(2)		07/13/2015	Ordinary Shares	12,929	\$0	12,92	29	D	

Explanation of Responses:

- 1. On July 13, 2005, the reporting person was awarded a contingent, performance based grant for an opportunity to earn 12,517 restricted shares. This opportunity was subject to the satisfaction of certain performance criteria based upon specified peer groups. Depending upon the issuer's performance within the peer groups, the reporting person could earn some, all or none of the shares. The issuer's actual performance resulted in 7,260 restricted shares being granted, which vest as follows: 2,420 on March 19, 2007, 2,420 on January 1, 2008 and 2,420 on January 1, 2009.
- 2. On July 13, 2005, the reporting person was awarded a contingent, performance based grant of 22,292 stock options, which were subject to the satisfaction of certain performance criteria based upon specified peer groups. Depending upon the issuer's performance within the peer groups, the reporting person could earn some, all or none of the options. The issuer's actual performance resulted in options to purchase 12,929 shares being earned, which vest as follows: 4,309 on March 19, 2007, 4,310 on January 1, 2008 and 4,310 on January 1, 2009.
- 3. Shares automatically withheld upon vesting to satisfy tax withholding obligations.

Remarks:

Chipman Earle

03/20/2007

** Signature of Reporting Person

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

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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