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TRANSOC Form 4 June 16, 200	05 Л Л	STATES	SECUI	RITIES A	ND EX(CHAI	NGE (COMMISSION	т –	APPROVAL	
Check the check	his box		Wa	shington,	D.C. 20	549			OMB Number: Expires:	3235-0287 January 31, 2005	
subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Estimated average burden hours per								urs per			
(Print or Type	Responses)										
	Address of Reporting NGREGORY L	Person <u>*</u>	Symbol	r Name and SOCEAN			Ig	5. Relationship o Issuer	f Reporting Pe	rson(s) to	
(Last)	(First) (1	Middle)		f Earliest Tr	_	~]		(Che	ck all applicab	le)	
				nth/Day/Year) 15/2005				Director10% Owner XOfficer (give titleOther (specify below)below) Sr. VP and CFO			
	(Street)			endment, Da nth/Day/Year	-			6. Individual or J Applicable Line) _X_ Form filed by	One Reporting I	Person	
HOUSTON, TX 77046 — Form filed by More than One Reporting Person							Reporting				
(City)	(State)	(Zip)	Tab	le I - Non-D	Derivative S	Securi	ties Acc	uired, Disposed o	f, or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	3. Transactio Code (Instr. 8)	(Instr. 3, 4	sposed 4 and 5 (A) or	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)	
Ordinary	0.611.510.005			Code V		(D)	Price \$		D		
Shares	06/15/2005			M <u>(1)</u>	1	А	28.8	1	D		
Ordinary Shares	06/15/2005			<u>S(1)</u>	1	D	\$ 55	0	D		
Ordinary Shares	06/15/2005			M <u>(1)</u>	19,659	А	\$ 21.2	19,659	D		
Ordinary Shares	06/15/2005			S <u>(1)</u>	19,659	D	\$ 55	0	D		
Ordinary Shares								808	Ι	By Issuer Employee Stock	

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Purchase Plan

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of actionDerivative Securities 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		erivative Expiration Date ecurities (Month/Day/Year) cquired (A) Disposed of D) nstr. 3, 4,		7. Title and Amount of Underlying Securities8(Instr. 3 and 4)S(Instr. 5 and 4)(11)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options	\$ 28.8	06/15/2005		M <u>(1)</u>		1	(2)	07/10/2012	Ordinary Shares	1
Stock Options	\$ 21.2	06/15/2005		M <u>(1)</u>	19	9,659	<u>(3)</u>	07/10/2013	Ordinary Shares	19,659

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
CAUTHEN GREGORY L 4 GREENWAY PLAZA HOUSTON, TX 77046			Sr. VP and CFO				
Signatures							

William E. Turcotte by Power of	06/16/2005
Attorney	00/10/2003

**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) The transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on May 9, 2005.

(2) Grant of 40,000 options vest as follows: 13,333 on July 10, 2003, 13,333 on July 10, 2004 and 13,334 on July 10, 2005.

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(3) Grant of 58,978 options vest as follows: 19,659 on April 11, 2005, 19,659 on January 1, 2006 and 19,660 on January 1, 2007.

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.