U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)

EEOC Standard Form 100 (SF 100) Revised 08/2023

2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										Expiration Date: 11/30/2026					
SECTION A - TYPE OF REPORT															
						D REP									
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OFS COMPANY ID		SECI	ION	- ENII	LOIL	KIDEN		OYER N	AME						
M183483						NAE	ORS IN			NC					
W165465						INAL	ONS II	NDU31	ML3 I	NC					
ADDRESS CITY/TOWN STATE ZIP CODE							DE								
515 WEST GREENS ROAD, SUITE 200 HOUSTON TX 77067							3 7								
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HO/ESTABLISHMENT-LEVEL UNIT ID	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME														
HEADQUARTERS OR ESTABLISHMI	ENT-LEV	NT-LEVEL ADDRESS				CITY/TOWN						STATE		ZIP CC	DE
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X YES (Employer Is Eligible				-							NGER I	N BUSI	INESS		
SEC	CTION						SIGNA	TION (i	if applic	able)					
		<u>Un</u>	ique En	tity ID (<u>UEI)</u> :	Not App	licable								
☐ YES (Single-Establishm	ent Emp	olover is	Federa	l Contra	ctor)	YES (Multi-Es	tablishm	ent Em	plover is	Federal	Contra	ctor)		
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YES (I	leadqua:	rters is l	ederal	Contrac	tor) 🔲	YES (N	lon-Head	lquarter	s Establ	ishment	is Feder	al Contr	actor)		
		□ Y	ES (Or	ne or Mo	ore Non	-Headqu	arters E	stablish	ments i	s Federa	l Contra	ictor)			
		S	ECTIC	N G - 1	NAICS	INFOR	MATIO	N							
		D													
213111 - Drilling Oil and Gas Wells SECTION H – WORKFORCE DEMOGRAPHIC DATA															
	Race/Ethnicity														
	Hisp	anic					Not	Hispan	ic or L	atino					
		or Latino				Not Hispanic or Latino Male					Fen	nale	1		
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				듩		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		Black or African American		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	_
JOB CATEGORIES				Black or African American		lai s	nerican Indian Alaska Native	Ra		~ iš		lai Saa	nerican Indian Alaska Native	- Ra	Row
	<u>o</u>	Female	White	ck or Afric American	Asian	c ai	Ind Nai	ē	White	Black or an Amer	Asian	c ai	a n	<u> </u>	Total
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Executive/Senior Level Officials and Managers	9	1	49	0	20	0	0	2	11	2	4	0	0	0	98
First/Mid-Level Officials and Managers	91	17	425	22	32	1	10	7	56	10	5	1	0	2	679
Professionals	43	32	142	12	64	0	3	6	38	11	28	0	0	2	381
Technicians	101	0	290	41	13	0	5	11	3	0	2	0	0	0	466
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	18	33	41	5	4	0	0	0	63	12	4	1	0	5	186
Craft Workers	311	0	576	43	2	1	18	11	1	0	0	0	0	0	963
Operatives	318	1	378	77	0	1	11	10	0	0	0	0	0	0	796
Laborers and Helpers	47 0	0	138 0	34 0	0	0	0	6	0	0	0	0	0	0	231
Service Workers	U	U	U	U	U	U	U	U	U	U	U	U	U	U	L U

SECTION I – WORKFORCE SNAPSHOT PERIOD

11/11/2023 - 11/24/2023

SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)

Not Applicable

CURRENT 2023 REPORTING YEAR TOTAL

PRIOR 2022 REPORTING YEAR TOTAL 1067

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)

EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

SECTION R OFFICIAL CERTIFICATION OF SUBMISSION								
EMPLOYER IDENTIFICATION								
OFS COMPANY ID	EMPLOYER NAME							
M183483	NABORS INDUSTRIES INC							
ADDRESS		CITY/TOWN	STATE	ZIP CODE				
515 WEST GREENS	ROAD, SUITE 200	HOUSTON	TX	77067				

CERTIFICATION COMMENTS (optional)

No.	Cortificati	on Comment	e Provided

CERTIFICATION STATEMENT

"I certify that the information, including any workforce demographic data, provided in this report is correct and true to the best of my knowledge and was prepared in conformity with the directions set forth in the form and accompanying instructions."

Knowingly and willfully false statements on this report are punishable by law, US Code, Title 18, Section 1001.

DATE OF CERTIFICATION 5/17/2024 2:44 PM [EST]

EMPLOYER'S CERTIFYING OFFICIAL					
Name of Employer's Certifying Official	Title of Certifying Official				
Cathy Saenz	HR Manager				
Email Address of Certifying Official	Telephone Number of Certifying Official				
cathy.saenz@nabors.com	281-775-8268				
PRIMARY POINT OF CONTACT (POC) FOR EEO-1 COMPONENT 1 REPORTING					
Name of Primary POC	Title and Employer of Primary POC				
Cathy Saenz	HR Manager				
·	Nabors				
Email Address of Primary POC	Telephone Number of Primary POC				
cathy.saenz@nabors.com	281-775-8268				