Edgar Filing: Ogren D John - Form 4

| Ogren D Joh Form 4 May 03, 200 FORM Check th if no lon subject to Section 2 Form 4 Form 5 obligation may con <i>See</i> Instr 1(b). | 1 4 UNITED STATI is box ger 5 16. or 5 5 5 5 5 5 5 5 5 5 5 5 5 | Section 16(a) of t | n, D.C. 20 N BENEF RITIES he Securit Iding Con | 549 [CIA] ies Ez ipany | L OWN | NERSHIP OF e Act of 1934, 1935 or Sectior | OMB Number: Expires: Estimated a burden hou response | • | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------------------------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------------------------------------|--|--|
| (Print or Type | Responses) | | | | | | | | | |
| 1. Name and A Ogren D Jo | 2. Issuer Name an Symbol CORE LABOR [CLB] | | | g | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| (Last) 12568 MEN | (First) (Middle) | 3. Date of Earliest 7 (Month/Day/Year) 05/01/2006 | Fransaction | | | X_ Director10% Owner Officer (give titleOther (specify below)below) | | | | |
| HOUSTON | 4. If Amendment, I Filed(Month/Day/Ye | - | l | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | r cison | | | | | | | | | |
| 1.Title of Security (Instr. 3) | any | ion Date, if Transact Code n/Day/Year) (Instr. 8) | | 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) | | |
| Common Shares | 05/01/2006 | Code N M | 7 Amount 1,000 | (D) A | Price \$ 28 | 82,000 | D | | | |
| Common Shares | 05/01/2006 | М | 10,000 | А | \$ 16.1 | 92,000 | D | | | |
| Common Shares | 05/01/2006 | М | 10,000 | А | \$ 10.26 | 102,000 | D | | | |
| Common Shares | 05/01/2006 | М | 10,000 | А | \$ 8.84 | 112,000 | D | | | |
| Common Shares | 05/01/2006 | М | 10,000 | A | \$ 23 | 122,000 | D | | | |

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| Common Shares | 05/01/2006 | М | 10,000 | А | \$ 25 | 132,000 | D |
|------------------|------------|---|--------|---|-------|---------|---|
| Common Shares | 05/01/2006 | F | 13,651 | D | \$ 63 | 118,349 | D |

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) | a 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactio Code (Instr. 8) | orDeriv Secu Acqu or Di (D) | rities uired (A) isposed of r. 3, 4, | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|---------------------------------------------------------------|----------------------------------------|-----------------------------------------|-----------------------------------------------|----------------------------------------------------------------|--------------------|---------------------------------------------------------------------|-------------------------------------|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Option to Exercise | \$ 28 | 05/01/2006 | | М | | 1,000 | 05/25/2001 | 05/25/2010 | Common Shares | 1,000 |
| Option to Exercise | \$ 16.1 | 05/01/2006 | | М | | 10,000 | 04/03/2002 | 04/03/2011 | Common Shares | 10,000 |
| Option to Exercise | \$ 10.26 | 05/01/2006 | | М | | 10,000 | 09/26/2002 | 09/26/2011 | Common Shares | 10,000 |
| Option to Exercise | \$ 8.84 | 05/01/2006 | | М | | 10,000 | 03/13/2004 | 03/13/2013 | Common Shares | 10,000 |
| Option to Exercise | \$ 23 | 05/01/2006 | | М | | 10,000 | 12/20/2005 | 12/20/2014 | Common Shares | 10,000 |
| Option to Exercise | \$ 25 | 05/01/2006 | | М | | 10,000 | 03/23/2006 | 03/23/2015 | Common Shares | 10,000 |

Reporting Owners

Relationships Reporting Owner Name / Address Director 10% Owner Officer Other Ogren D John 12568 MEMORIAL DRIVE Х HOUSTON, TX 77024 Signatures /s/ John D. Denson, 05/03/2006 Attorney-in-Fact **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).

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.