FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL							
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

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 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Cobb Galen						2. Issuer Name and Ticker or Trading Symbol NOW Inc. [DNOW]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
	<u>arcii</u>				3 D	Date of Earliest Transaction (Month/Day/Year)								4	Offi	ector cer (give title			specify
(Last) (First) (Middle) 7402 NORTH ELDRIDGE PARKWAY						08/27/2014									bel	ow)		below)	
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)										ne)	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person			
HOUSTON TX 77041															For	Form filed by More than One Reporting Person			
(City)	(St		Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date,			Code (Instr. 5)					nd Secu Bene Own	nount of rities ficially ed Following	6. Owners Form: Dir (D) or Ind (I) (Instr. 4	ect irect	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount (A		N) or D)	Price		saction(s) : 3 and 4)			(Instr. 4)
Common Stock 08/27/						2014		A		3,642 A		A	\$()	3,642				
		Та	ble II - De (e.								sed of, onvertib				y Owned	t			
1. Title of Derivative Security (Instr. 3)	Conversion Date Execution Date (Month/Day/Year) if an		3A. Deemed Execution Da if any (Month/Day/	Date, Transact					6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Num of Shar						

Explanation of Responses:

Remarks:

/s/ Raymond Chang, attorney

in fact

** Signature of Reporting Person Date

08/28/2014

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

- * 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.