

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

1. Name and Address of Reporting Person* <u>SIMMONS L E</u> (Last) (First) (Middle) <u>600 TRAVIS STREET</u> <u>SUITE 6600</u> (Street) <u>HOUSTON TX 77002</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>FORUM ENERGY TECHNOLOGIES, INC. [FET]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) <input checked="" type="checkbox"/> Other (specify below) Member of Group
	3. Date of Earliest Transaction (Month/Day/Year) <u>12/10/2012</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	12/10/2012		S		34,606	D	\$25.11	19,682,488	I	By SCF-V, L.P. ⁽¹⁾
Common Stock	12/11/2012		S		23,373	D	\$25.2	19,659,115	I	By SCF-V, L.P. ⁽¹⁾
Common Stock	12/12/2012		S		64,721	D	\$25.16	19,594,394	I	By SCF-V, L.P. ⁽¹⁾
Common Stock	12/10/2012		S		20,155	D	\$25.11	11,463,045	I	By SCF-VI, L.P. ⁽¹⁾
Common Stock	12/11/2012		S		13,613	D	\$25.2	11,449,432	I	By SCF-VI, L.P. ⁽¹⁾
Common Stock	12/12/2012		S		37,694	D	\$25.16	11,411,738	I	By SCF-VI, L.P. ⁽¹⁾
Common Stock	12/10/2012		S		25,339	D	\$25.11	10,279,505	I	By SCF-VII, L.P. ⁽¹⁾
Common Stock	12/11/2012		S		17,114	D	\$25.2	10,262,391	I	By SCF-VII, L.P. ⁽¹⁾
Common Stock	12/12/2012		S		47,389	D	\$25.16	10,215,002	I	By SCF-VII, L.P. ⁽¹⁾

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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date					

1. Name and Address of Reporting Person* <u>SIMMONS L E</u> (Last) (First) (Middle) <u>600 TRAVIS STREET</u>

SUITE 6600

(Street)

HOUSTON TX 77002

(City)

(State)

(Zip)

1. Name and Address of Reporting Person*

[SIMMONS L E & ASSOCIATES INC](#)

(Last)

(First)

(Middle)

600 TRAVIS STREET
SUITE 6600

(Street)

HOUSTON TX 77002

(City)

(State)

(Zip)

1. Name and Address of Reporting Person*

[SCF V LP](#)

(Last)

(First)

(Middle)

600 TRAVIS STREET
SUITE 6600

(Street)

HOUSTON TX 77002

(City)

(State)

(Zip)

1. Name and Address of Reporting Person*

[SCF-V, G.P., Limited Partnership](#)

(Last)

(First)

(Middle)

600 TRAVIS STREET
SUITE 6600

(Street)

HOUSTON TX 77002

(City)

(State)

(Zip)

1. Name and Address of Reporting Person*

[SCF VI LP](#)

(Last)

(First)

(Middle)

600 TRAVIS STREET
SUITE 6600

(Street)

HOUSTON TX 77002

(City)

(State)

(Zip)

1. Name and Address of Reporting Person*

[SCF-VI, G.P., Limited Partnership](#)

(Last)

(First)

(Middle)

600 TRAVIS STREET
SUITE 6600

(Street)

HOUSTON TX 77002

(City)

(State)

(Zip)

1. Name and Address of Reporting Person*

[SCF-VII, L.P.](#)

(Last)	(First)	(Middle)
600 TRAVIS STREET SUITE 6600		
<hr/>		
(Street)		
HOUSTON	TX	77002
<hr/>		
(City)	(State)	(Zip)

1. Name and Address of Reporting Person*

SCF-VII, G.P., Limited Partnership

(Last)	(First)	(Middle)
600 TRAVIS STREET SUITE 6600		
<hr/>		
(Street)		
HOUSTON	TX	77002
<hr/>		
(City)	(State)	(Zip)

Explanation of Responses:

1. L.E. Simmons is President and sole member of the board of directors of L.E. Simmons & Associates, Inc., a Delaware corporation ("LESA"), which is the sole general partner of each of SCF-V, G.P., Limited Partnership ("SCF-V GP"), SCF-VI, G.P., Limited Partnership ("SCF-VI GP") and SCF-VII, G.P. (SCF-VII Limited Partnership ("SCF-VII GP"), each of which are Delaware limited partnerships. Additionally, SCF-V GP is the sole general partner of SCF-V, SCF-VI GP is the sole general partner of SCF-VI and SCF-VII GP is the sole general partner of SCF-VII (SCF-VII, collectively with LESEA, SCF-V GP, SCF-VI GP, SCF-VII GP, SCF-V and SCF-VI, the "Reporting Entities"). Based on the reporting person's affiliation with the Reporting Entities, L.E. Simmons may be deemed to beneficially own all of the shares of common stock of the Issuer beneficially owned or deemed to be beneficially owned by the Reporting Entities.

L.E. Simmons

12/12/2012

** Signature of Reporting Person

Date

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.