FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washir

| D O 00E40        |              |
|------------------|--------------|
| gton, D.C. 20549 | OMB APPROVAI |
|                  |              |
|                  |              |

| OMB Number:            | mber: 3235-028 |  |  |  |  |  |  |
|------------------------|----------------|--|--|--|--|--|--|
| Estimated average burd | en             |  |  |  |  |  |  |
| 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)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* <u>Doran Patrick Joseph</u> |   |  |  |        |                              |                             |   |        |            | or Tradin   |       | ymbol<br>OLOG  |  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)                          |   |   |   |               |  |  |  |  |
|--|---|--|--|--------|------------------------------|-----------------------------|---|--------|------------|---|-------|--|--|--|---|---|---|---------------|--|--|--|--|
|  |   |  |  |        |                              | ICR                         |   |        |            |   |       |  |  | Directo  |   |   | 10% Ov  |               |  |  |  |  |
| (Last)   | (Fi   | rst)                                       | (Middle)                                       |        |                              | 3                           |   |        |            |   |       |  |  |  |   | Officer<br>below)                                   | (give title   |               | Other (s<br>below)   | pecify   |  |  |
| 200 CROSSING BOULEVARD   |   |  |  |        |                              |                             | 3. Date of Earliest Transaction (Month/Day/Year)            |        |            |   |       |  |  |  |   |   | EVP & Chief Technology Office   |               |  |  |  |  |
|  |   |  |  |        |                              | 03/19/2014                  |   |        |            |   |       |  |  |  |   |   |   |               |  |  |  |  |
| EIGHTH FLOOR   |   |  |  |        |                              |                             | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |        |            |   |       |  |  |  |   |   | 6. Individual or Joint/Group Filing (Check Applicable   |               |  |  |  |  |
| (Street)   |   |  |  |        |                              |                             | ,   |        | 3          |   |       | , ,  |  | Line)  | e)  |   |   |               |  |  |  |  |
| BRIDGEWATER NJ 08807   |   |  |  |        |                              |                             |   |        |            |   |       |  |  |  | )   | , , ,   |   |               |  | - 1  |  |  |
|  |   |  |  |        |                              |                             |   |        |            |   |       |  |  |  | Form filed by More than One Reporting<br>Person |   |   |               |  |  |  |  |
| (City)   | (SI   | ate)                                       | (Zip)  |        |                              |                             |   |        |            |   |       |  |  |  |   |   |   |               |  |  |  |  |
|  |   | Tab  | le I - No                                      | n-Deri | vativ                        | e Se                        | curit   | ies A  | cqu        | ıired, D  | isp   | osed o   | f, or B                                | ene  | ficiall   | y Owned   |   |               |  |  |  |  |
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/D             |   |  |  |        |                              | ear)                        | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |        | ·          | Code (Instr.  |       | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4<br>5) |  |  |   | 5. Amou<br>Securitie<br>Benefici<br>Owned F         | es  | Form<br>(D) o | n: Direct<br>r Indirect  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership                |  |  |
|  |   |  |  |        |                              |                             | Code  | ,      | Amount     | (A)<br>(D)  | or    | Price  | Reported<br>Transact<br>(Instr. 3      | tion(s)  |   |   | (Instr. 4)  |               |  |  |  |  |
| Common Stock 03/19/  |   |  |  |        |                              | 2014                        |   |        | M          |   | 2,272 | ! <i>A</i>   |  | \$30.5   | 28,873  |   |   | D             |  |  |  |  |
| Common Stock 03/19/  |   |  |  |        | 9/201                        | /2014                       |   |        | S          |   | 2,272 | ! I  | ,                                      | \$36.5   | 26,601  |   |   | D             |  |  |  |  |
|  |   | -  | Гable II -                                     |        |                              |                             |   |        |            |   |       |  |  |  |   | Owned   |   |               | <u> </u>   |  |  |  |
|  |   |  |  | (e.g., | puts,                        | call                        | s, wa   | arrant | s, c       | ptions  | , с   | onvertil   | ole se                                 | urit   | ies)  |   |   |               |  |  |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deeme<br>Execution<br>if any<br>(Month/Day | Date,  | 4.<br>Transa<br>Code (<br>8) | Transaction<br>Code (Instr. |   | of     |            | Date Exerc<br>piration D<br>pnth/Day/\frac{\partial}{2} | ate   |  | Amoun<br>Securit<br>Underly<br>Derivat | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |   | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | lly           | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
|  |   |  |  |        | Code                         | v                           | (A)   | (D)    | Dat<br>Exe | te<br>ercisable   |       | xpiration<br>ate   | Title                                  | OI<br>N<br>Of  | umber   |   |   |               |  |  |  |  |
| Stock<br>Option<br>(Right to<br>Purchase)                            | \$30.55   | 03/19/2014                                 |  |        | M                            |                             |   | 2,272  | 12/        | 06/2012 <sup>(1)</sup>                                  | 1     | 2/06/2018  | Commo<br>Stock                         | n 2  | 2,272   | \$0.00  | 10,224  | 4             | D  |  |  |  |

## Explanation of Responses:

1. The option shall become exercisable with respect to the first 25 percent of the shares subject to the option when the Reporting Person completes 12 months of continuous service after 12/6/2011. The option shall become exercisable with respect to an additional 1/48th of the shares subject to the option when the Reporting Person completes each month of continuous service thereafter.

## Remarks:

\*\*\*All of the sales reported on this Form were effected pursuant to an approved Rule 10b5-1 trading plan.\*\*\*

/s/ Patrick J. Doran 03/21/2014

\*\* 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.