FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
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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	Sect	ion 30(h) of t	the I	Investment	Con	npany Act	of 1940							
1. Name and Address of Reporting Person* Angelle Evelyn M (Last) (First) (Middle) 10200 BELLAIRE BLVD. 2NE-12A					2. Issuer Name and Ticker or Trading Symbol HALLIBURTON CO [HAL]										Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
						of Earl 2013	iest Tı	rans	saction (Moi	nth/I	Day/Year)		helow		ief A	Other (specify below) Acct. Officer				
(Street) HOUSTON TX 77072				_ 4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	e) <mark>X</mark> Form	filed by One	oint/Group Filing (Check of led by One Reporting Per led by More than One Re		son	
(City)	(S	itate)	(Zip)													Perso	n			
		Tab	le I - Noi	n-Deri\	ative	e Se	curit	ies /	Acc	quired, C	Dis	posed (of, or	Benefi	cial	ly Owne	d			
1. Title of Security (Instr. 3) 2. Transa Date (Month/L				ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		e, Transaction Code (Instr. !					4 and Securit		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										Code	v	Amount	nount (A) or (D)		rice	Transac	Transaction(s) (Instr. 3 and 4)			(,
Common	Stock			12/02	12/02/2013				D		597 ⁽¹	7 ⁽¹⁾ D \$		52.0	01 40,186.5		D			
		7	Γable II -							uired, Dis , options	•		•		•	Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr 8)		n of		e (s	6. Date Exercisa Expiration Date (Month/Day/Year			e and 7. Title and Amount of Securities Underlying Derivative St (Instr. 3 and		rity	8. Price of Derivative Security (Instr. 5)	Derivative derivative Security Securities	Ownersh Form: Direct (D or Indired (I) (Instr.		11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)		Date Exercisable		opiration	Title	Amo or Num of Shar	ber					
Option to Buy Common Stock	\$33.5									12/05/2012	12	2/05/2022	Commo Stock		00		7,700		D	
Option to Buy Common Stock	\$35.57									12/06/2011	12	2/06/2021	Commo Stock		00		5,900		D	
Option to Buy Common Stock	\$39.19									12/01/2010	12	2/01/2020	Commo Stock	ⁿ 5,4	00		5,400		D	
Option to Buy Common Stock	\$29.35									12/01/2009	12	2/01/2019	Commo Stock	ⁿ 7,1	00		7,100		D	
Option to Buy Common Stock	\$35.67									02/13/2008	02	2/13/2018	Commo Stock		00		5,500		D	
Option to Buy Common Stock	\$33.02									01/06/2006	01	1/06/2016	Commo Stock		00		2,800		D	
Option to Buy Common Stock	\$29.87									01/03/2007	01	1/03/2017	Commo Stock		00		3,300		D	
Option to Buy Common	\$35.03				_					06/07/2007	06	6/07/2017	Commo	n 2,4	50		2,450	Ī	D	

Explanation of Responses:

Remarks:

^{1.} Shares transferred to Halliburton Company for payment for Federal tax withholding obligations on lapse of restrictions on shares issued under the Stock and Incentive Plan. Said Plan permits Reporting Person to satisfy withholding tax obligation by transferring unrestricted shares to the Issuer.

<u>Attorney</u>

** 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.