FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

washington,	D.C.	20549	

	OMB AP	PRO	'
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:		
On the Enter of On the Country of th	H =		

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 3235-0287 Estimated average burden hours per response: 0.5

Name and Address of Reporting Person*     MIRE WELDON J					2. Issuer Name and Ticker or Trading Symbol HALLIBURTON CO [ HAL ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last) (First) (Middle) HALLIBURTON COMPANY 10200 BELLAIRE BLVD.					04/	3. Date of Earliest Transaction (Month/Day/Year) 04/16/2004										X Officer (give title Other (specibelow) below)  Vice Pres - Human Resources					S
(Street) HOUSTON TX 77072 (City) (State) (Zip)			,   4. IT	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person					n		
(City)	(5)			n-Deriv	ative	Se	curiti	es Ac	cauir	red. [	Dist	nosed o	of. or	Bene	eficia	ally C	)wned	<u> </u>			
Date			2. Transa Date	action Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		, 3. Tra	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)		(A) or	or 5. Amo 4 and Securit Benefic Owned		int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Co	ode	v	Amount		(A) or (D)	Price	- 11	Reporte Transac (Instr. 3	ction(s)			(Instr. 4)
Common	Stock			04/16	/2004					D		38(1)		D	\$31.	.61	28,7	778.15		D	
Common Stock		04/16	/2004					A		3.594 <sup>(2)</sup>		A	\$30.	39 858		8.486			Master Trust		
		Т	able II -									sed of, onverti					vned				
1. Title of Derivative Security (Instr. 3)	1. Title of 2. 3. Transaction 3A. Deemed 4. Derivative Conversion Date Execution Date, Tr. Security or Exercise (Month/Day/Year) if any			Transaction (Code (Instr.   13)		ı of Ex		Expira	6. Date Exercisable and Expiration Date (Month/Day/Year)						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 Exerc	cisable		piration ate	Title	OI N O1	umber						
Option to Buy Common Stock	\$26.03								01/02	2/2004	01	/02/2014	Comn		5,810			6,810		D	
Option to Buy Common Stock	\$39.5								12/02	2/2000	12	/02/2009	Comn		3,000			3,000		D	
Option to Buy Common Stock	\$29.0625								02/17	7/2000	02	/17/2009	Comn		,800			1,800		D	
Option to Buy Common Stock	\$31.55								04/01	1/2003	07	//19/2011	Comn		3,225			3,225		D	
Option to Buy Common Stock	\$39.55								02/23	3/2002	02	2/23/2011	Comn		7,500			7,500		D	

## **Explanation of Responses:**

- 1. Shares transferred to Halliburton Company for payment of Federal Income Tax withholding obligation on lapse of restrictions under the 1993 Stock and Incentive Plan. Said Plan permits Reporting Person to satisfy obligation by transferring unrestricted shares to the Issuer.
- 2. Reporting Person's beneficial interest in 858.486 shares of Halliburton Company Common Stock by the Halliburton Company Employee Benefit Master Trust No. 3, which shares are 100% vested.

## Remarks:

Michael A. Weberpal, by Power of Attorney

04/19/2004

\*\* 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.