FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20549
vvasilington,	D.O.	20070

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STATEMENT	OF CHANG	ES IN BE	ENEFICIAL	OWNERSHI	Р

OMB APPRO	PROVAL					
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 Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Malone Robert A					2. Issuer Name and Ticker or Trading Symbol HALLIBURTON CO [HAL]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
THE OTHER PROPERTY.														X Directo	r		10% Ov	/ner
(Last)	X 437	First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 08/03/2015								Officer below)	(give title		Other (specify below)	
289 PR 3344					4	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Application)									olicable			
				- ```									Line)					
(Street)												X Form filed by One Reporting Person						
SONORA TX 76950-0437												Form filed by More than One Reporting Person						
(City)	(\$	State)	(Zip)															
		Tal	ole I - Noi	n-Deriv	vativ	e Se	curitie	es Ac	quired,	Dis	posed o	f, or Be	neficial	y Owned				
Da		2. Trans Date (Month/	/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (A) of (D) (Instr. 3, 4		5. Amour Securitie Beneficia Owned F	s ally ollowing	Form	: Direct I Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or	Price	Reported Transaction(s) (Instr. 3 and 4)			'	(Instr. 4)
C	C41-			00/0	2/201	/2015					2.0(0(1)	<u> </u>	00	-			D	
Common	Stock			08/0.	3/201	13			M		2,869(1	1) A	\$0	21,	248		D	
			Table II -								osed of, convertib			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	4. Transa Code (8)		5. Num Deriva Securi Acquir or Disp of (D) (ties red (A) posed (Instr.	Expiration Date (Month/Day/Year A)		ion Date Amount of		of s g e Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Ownership Form:	Beneficial Ownership (Instr. 4)
				,	Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares		Transaction(s (Instr. 4)	on(s)	,	
2015 Restricted Stock Units	(2)	08/03/2015			A		4,454		(3)		(3)	Common Stock	4,454	\$0	4,454		D	
2014 Restricted Stock Units	(2)	08/03/2015			М			650	(3)		(3)	Common Stock	650	\$0	1,953		D	
2013 Restricted Stock Units	(2)	08/03/2015			M			901	(3)		(3)	Common Stock	901	\$0	1,802		D	
2012 Restricted Stock	(2)	08/03/2015			M			1,318	(3)		(3)	Common Stock	1,318	\$0	1,318		D	

Explanation of Responses:

- 1. Vesting on August 3, 2015 of 25% of restricted stock units granted on August 1, 2012, August 1, 2013 and August 1, 2014.
- 2. Each restricted stock unit represents a right to receive one share of the Company's common stock.
- 3. The restricted stock units vest in four equal annual installments beginning with the first anniversary of the award. Shares will be delivered to the reporting person either upon vesting, or if reporting person elected to defer receipt, following cessation as a director.

Remarks:

Robert L. Hayter, by Power of **Attorney** ** Signature of Reporting Person

08/05/2015

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.