FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden 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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* CORNELISON ALBERT O JR						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 Officer (give title X Other (specify				
(Last) (First) (Middle) HALLIBURTON COMPANY						3. Date of Earliest Transaction (Month/Day/Year) 06/09/2014								below) A below) Former Vice President				
3000 N. SAM HOUSTON PKWY E.					_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable				
(Street) HOUSTON TX 77032			77032			Line) X Form filed by One Reporting Person Form filed by More than One Reporting												
(City) (State) (Zip)												Person						
		Tab	le I - No	n-Deri	vativ	e Se	curi	ties Ac	quired	, Dis	sposed o	f, or Be	neficial	y Owned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ay/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		ction Instr.	4. Securities Acquired Disposed Of (D) (Instr.			Securitie Benefici Owned F	5. Amount of Securities Beneficially Owned Following		n: Direct r Indirect estr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D) Price		Reporte Transaci (Instr. 3	tion(s)			(Instr. 4)	
Common Stock 06/09/					9/2014	2014			M		17,067	A	\$35.57		,035		D	
Common Stock 06/09/2					9/2014	.014		S		17,067	D	\$ 66.92 ⁽¹⁾ 76		,968		D		
		-	Table II -								osed of, convertil			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	ed n Date,	4. Transaction Code (Instr 8)		5. Number of		6. Date Exercisable a Expiration Date (Month/Day/Year)		sable and			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares					
Option to Buy Common Stock	\$35.57	06/09/2014			M			17,067	12/06/2	011	12/06/2021	Common Stock	25,600	\$0	8,533		D	
Option to Buy Common Stock	\$33.5								12/05/2	012	12/05/2022	Common Stock	25,999		25,999	9	D	
Option to Buy Common Stock	\$50.62								12/04/2	013	12/04/2023	Common Stock	5,700		5,700		D	
Option to Buy Common	\$39.19								12/01/2	010	12/01/2020	Common Stock	25,100		25,100)	D	

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$66.90 to \$66.95, inclusive. The Reporting Person undertakes to provide to Halliburton Company, any security holder of Halliburton Company, or the staff of the Securities and Exchange Commission, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (1) to this Form 4.

Remarks:

Robert L. Hayter, by Power of **Attorney**

06/10/2014

** 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.