FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasnington, I	J.C. 205	549

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

**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

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1. Name and Address of Reporting Person*  Angelle Evelyn M  (Last) (First) (Middle)  10200 BELLAIRE BLVD.  2NE-12A					2. Issuer Name <b>and</b> Ticker or Trading Symbol HALLIBURTON CO [ HAL ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (size title Check (specify))						
				10/	3. Date of Earliest Transaction (Month/Day/Year) 10/01/2009									X Officer (give title Other (specify below)  Vice President - Controller					
(Street) HOUSTON TX 77072				_   4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting						
(City) (State) (Zip)										Person									
		Tab	le I - Noi	n-Deri	vative	e Se	curit	ies Ad	cquired,	Dis	posed o	of, or Be	enefi	cially	Owned				
1. Title of Security (Instr. 3)			2. Trans Date (Month	saction /Day/Yea	y/Year) Ex		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction D		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			Securitie Beneficia	5. Amount of Securities Beneficially Owned Following		n: Direct	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	Amount (A) o		rice	Transact (Instr. 3	ion(s)			(Instr. 4)
Common	Stock			10/0	1/2009	)			S <sup>(1)</sup>		6,114	1 D	\$	27.07	34,8	67.68		D	
Common	Stock			10/0	01/2009				M		3,280	) A	\$	14.43	38,1	147.68		D	
Common	Stock			10/0	1/2009	)			S <sup>(1)</sup>		3,280	) D	\$	27.07	34,8	67.68		D	
		7	「able Ⅱ -						uired, D s, optior			•		-	Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year) if	3A. Deeme Execution if any (Month/Da	Date,		ansaction ode (Instr.		of Ex		Date Exercisable and xpiration Date Month/Day/Year)		7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		5	. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amo or Num of Sha	nber					
Option to Buy Common Stock	\$14.43	10/01/2009			M			3,280	03/16/200	4 0	3/16/2014	Common Stock	3,2	280	(2)	0		D	
Option to Buy Common Stock	\$15.42								12/02/200	8 1	2/02/2018	Common Stock	11,	300		11,300	)	D	
Option to Buy Common Stock	\$35.67								02/13/200	8 0	2/13/2018	Common Stock	5,5	500		5,500		D	
Option to Buy Common Stock	\$33.02								01/06/200	6 0	1/06/2016	Common Stock	2,8	800		2,800		D	
Option to Buy Common Stock	\$29.87								01/03/200	7 0	1/03/2017	Common Stock	3,3	300		3,300		D	
Option to Buy Common Stock	\$35.03								06/07/200	7 0	6/07/2017	Common Stock	2,4	150		2,450		D	

## Explanation of Responses:

- 1. The sales were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on September 4, 2009.
- $2.\ Options\ were\ disposed\ of\ through\ exercise\ pursuant\ to\ Rule\ 10b5-1\ trading\ Plan\ adopted\ by\ Reporting\ Person\ on\ September\ 4,\ 2009.$

## Remarks:

Robert L. Hayter, by Power of

10/05/2009

\*\* Signature of Reporting Person

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.