FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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

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1. Name and Address of Reporting Person* MUCHMORE ROBERT CHARLES 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 Other (specify)					
(Last) (First) (Middle) HALLIBURTON COMPANY 10200 BELLAIRE BLVD.						3. Date of Earliest Transaction (Month/Day/Year) 02/11/2004									X Officer (give title Other (specify below) below) VP Financial Controls					
(Street) HOUSTON TX 77072					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									G. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S		(Zip)																	
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					action	ar)	2A. Dee Execution if any (Month/	med on Date	3. Transa	3. 4. Securi Transaction Disposed Code (Instr. 5)			of, or Benefici ities Acquired (A) or d Of (D) (Instr. 3, 4 a		5. Amo Securit Benefic	unt of ies ially Following	Form (D) o	n: Direct r Indirect estr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	()	A) or D)	Price	Transac (Instr. 3	ction(s)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Common Stock 02/11/2					/2004	2004		D		275((1) D :		\$26.	03 34	34,916		D	Master		
Common Stock 02/1					/2004	2004		D		2.69	01 D \$3		\$30.	15 543	5 543.328 ⁽²⁾			Trust		
		ī							quired, E s, optioi						y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemo Execution if any (Month/Da	Date,	l. Fransaction Code (Instr.		n of E		Expiration	6. Date Exercisable an Expiration Date (Month/Day/Year)		7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	or Nu of	ımber						
Option to Buy Common Stock	\$29.56								12/04/199	7 1	2/04/2006	Comn Stoc		4,000		24,000)	D		
Option to Buy Common Stock	\$54.5								12/03/199	8 1	2/03/2007	Comn Stoc		,000		6,000		D		
Option to Buy Common Stock	\$28.125								12/02/199	9 1	2/02/2008	Comn		,900		6,900		D		
Option to Buy Common Stock	\$39.5								12/02/200	0 1	2/02/2009	Comn),500		10,500		D		
Option to Buy Common Stock	\$34.75								12/06/200	1 1	2/06/2010	Comn		2,000		12,000)	D		
Options to Buy Common	\$31.55								04/01/200	3 0	7/19/2011	Comm		,876		7,876		D		

Explanation of Responses:

- 1. Shares transferred to Halliburton Company for payment for Federal Income Tax withholding obligations on lapse of restrictions on shares issued under the 1993 Stock and Incentive Plan. Said Plan permits Reporting Person to satisfy withholding tax obligation by transferring unrestricted shares to the Issuer.
- 2. Reporting Person's beneficial interest in 543.328 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

02/11/2004

** 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.