FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

<i>N</i> ashington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	DVAL							
l	OMB Number:	3235-0287							
l	Estimated average burden								
l	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

1. Name and Address of Reporting Person*  CORNELISON ALBERT O JR					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 (give title Other (specify					
	BURTON C	*	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/30/2012									below)	)	nera	below)  l Counsel	<b>эреспу</b>
(Street) HOUSTON TX 77032			4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)												Perso	n 			
		Tab	le I - No	n-Deriv	/ative	Se	curiti	es A	cquired,	Dis	osed	of, or E	enefi	cially	/ Owned	t			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D			Execution Date,		Transaction Dispose Code (Instr. 5)		rities Acquired (A) o ed Of (D) (Instr. 3, 4 a		1 and Securiti Benefic		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) (D)	or Pi	ice	Transac (Instr. 3	ction(s)			(Instr. 4)
Common	Stock			<u>                                     </u>	0/2012				D		575(			33.19		5,474		D	
		7							quired, D s, option						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution			Transaction Code (Instr.		n of Ex		6. Date Exercisable Expiration Date (Month/Day/Year)		7. Title and Am of Securities Underlying Derivative Sect (Instr. 3 and 4)			3. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ve es ially ng ed etion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Amo or Num of Title Shar		ber					
Option to Buy Common Stock	\$35.57								12/06/2011	L 12	2/06/2021	Common Stock	25,6	500		25,600		25,600 D	
Option to Buy Common Stock	\$29.35								12/01/2009	9 12	2/01/2019	Common Stock	24,0	066		24,066	5	D	
Option to Buy Common Stock	\$15.42								12/01/2008	3 12	2/01/2018	Common Stock	13,3	333		13,333	3	D	
Option to Buy Common Stock	\$39.19								12/01/2010	) 12	2/01/2020	Common Stock	25,1	100		25,100	)	D	
Option to Buy Common Stock	\$36.9								12/05/2007	7 12	2/05/2017	Common Stock	18,0	000		18,000	)	D	
Option to Buy Common Stock	\$33.17								12/06/2006	5 12	2/06/2016	Common Stock	31,2	200		31,200		D	

## **Explanation of Responses:**

1. Shares transferred to Halliburton Company for payment for Federal tax withholding obligations on lapse of restrictions on shares issued under the Stock and Incentive Plan. Said Plan permits Reporting Person to satisfy withholding tax obligation by transferring unrestricted shares to the Issuer.

## Remarks:

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

04/03/2012

<u>Attorney</u>

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.