#### FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 

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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	Secti	ion 30(l	h) of th	e Investmer	it Co	npany Ac	t of 1940								
1. Name and Address of Reporting Person* <u>Angelle Evelyn M</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol HALLIBURTON CO [ HAL ]									5. Relationship of Reporting Person(s) to Issue (Check all applicable)  Director 10% Owner (Street Check Che					
(Last) (First) (Middle) 10200 BELLAIRE BLVD. 2NE-12A						3. Date of Earliest Transaction (Month/Day/Year) 05/22/2012										X Officer (give title Other (specify below)  Senior VP -Chief Acct. Officer				
					_ 4. I	f Ame	endme	nt, Date	e of Original	Filed	I (Month/E	Day/Year)		6. Ind		Joint/Group	Filino	g (Check Ap	plicable	
(Street) HOUSTON TX 77072					_							X Form filed by One Reporting Person  Form filed by More than One Reporting Person								
(City)	(S	tate)	(Zip)												1 0130	11				
		Tab	le I - No	n-Deri	vative	e Se	curit	ies A	cquired,	Dis	posed	of, or E	enefi	icially	/ Owne	d				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Executio			e, Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4		4 and Securit		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	nt (A) or (D)		rice	Transac (Instr. 3	tion(s)			. ,	
Common Stock			05/2	05/22/2012				D		53(1	D \$		30.78	40,4	40,465.91		D			
		T							quired, D s, optior						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	Date,	4. Transactio Code (Insti		n of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		Derivative Security (Instr. 5)		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	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	Title	Amo or Num of Shai	ber						
Option to Buy Common Stock	\$35.57								12/06/201	1 1	2/06/2021	Common Stock	5,9	000		5,900		D		
Option to Buy Common Stock	\$39.19								12/01/201	0 1	2/01/2020	Common Stock	5,4	00		5,400		D		
Option to Buy Common Stock	\$29.35								12/01/200	9 1	2/01/2019	Common Stock	7,1	.00		7,100		D		
Option to Buy Common Stock	\$15.42								12/02/200	8 1	2/02/2018	Common Stock	11,3	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	800		3,300		D		
Option to Buy Common	\$35.03								06/07/200	7 0	6/07/2017	Common	2,4	50		2,450		D		

### **Explanation of Responses:**

# Remarks:

<sup>1.</sup> 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.

#### <u>Attorney</u>

\*\* 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.