Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	OVAL						
l	OMB Number:	3235-0287						
	Estimated average burden							
	hours per response:	0.5						

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* <u>Miller Jeffrey Allen</u>							2. Issuer Name and Ticker or Trading Symbol HALLIBURTON CO [HAL]										Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) 3000 N. SAM HOUSTON PARKWAY E.						3. Date of Earliest Transaction (Month/Day/Year) 12/11/2017										below)	(give title	sider	Other (specify below)				
(Street) HOUSTON TX 77032					4. If	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 Person							
(City)	(S	state)	(Zip)		4:					ı D:				6: :	- 11 4						4		
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					action	ar) i	2A. Deer Execution f any	A. Deemed xecution Date,		3. 4. Son Display Code (Instr. 5)		ecurities Acquired (A) posed Of (D) (Instr. 3, 4			nd	5. Amoun Securities Beneficia Owned Fo	Amount of curities neficially ned Following		vnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amoun	t (A) or (D)		Price	ce Report Transa (Instr.		on(s)			(Instr. 4)			
Common Stock 12/2						1			F		3,508	3,508 ⁽¹⁾		\$43	.46	485,62	20.046(2)		D		╗		
			Table II -	(e.g.,	puts,		s, wa	rrant	s, opti	ons,	conver	tible	secu	rities)								
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transactio Code (Inst 8)				6. Date E Expiration (Month/E	n Date	•	7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		s Security	D S	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	is Silly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title		Amount or Number of Share	.								
Option to Buy Common Stock	\$43.38								12/06/20	17	12/06/2027		nmon ock	128,50	00		128,50	00	D				
Option to Buy Common Stock	\$53.54								12/07/20	16	12/07/2026		nmon ock	69,50	0		69,500	0	D				
Option to Buy Common Stock	\$38.95								12/02/20	15	12/02/2025		nmon ock	99,20	0		99,200	0	D				
Option to Buy Common Stock	\$40.75								12/03/20	14	12/03/2024		nmon ock	115,10	00		115,10	00	D				
Option to Buy	\$50.62								12/04/20	13	12/04/2023	Con	nmon	55,70	0		55,700	0	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.
- 2. Beneficial ownership amount increased by 539.982 to correct for an administrative error on form 4 report dated April 2, 2014.

Remarks:

Stock

/s/ Bruce A. Metzinger, by Power of Attorney

** Signature of Reporting Person

12/13/2017

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.