FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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

| Name and Address of Reporting Person*                      |   |  |  |         |   | 2. Issuer Name and Ticker or Trading Symbol HALLIBURTON CO [ HAL ] |              |   |   |         |                    |   |  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)    |   |  |                                      |  |                                |  |
|--|---|--|--|---------|---|--|--------------|---|---|---------|--------------------|---|--|--|---|--|--------------------------------------|--|--------------------------------|--|
| LESAL  | <u>R DAVID</u>  | <u>J</u>                                   |  |         |   |  |              | TtT O1                                  | 100   | L       | ,                  |   |  | X  | Directo   | r  |                                      | 10%  | Owner                          | r  |
| (Last) (First) (Middle) 1401 MCKINNEY                      |   |  |  |         | 3. Date of Earliest Transaction (Month/Day/Year) 12/06/2007 |  |              |   |   |         |                    |   |  | X Officer (give title below) Other (specify below)  Chairman, Pres and CEO |   |  |                                      |  | cify                           |  |
| SUITE 2400   |   |  |  |         |   |  |              |   |   |         |                    |   |  |  |   |  |                                      |  |                                |  |
|  |   |  |  |         | _ 4.1   | If Ame   | endmer       | nt. Date o                              | of Origina  | al File | d (Month/I         | Dav/Year)   |  | 6. Ind   | ividual or J  | oint/Grou  | p Filina                             | (Check   | Applica                        | able   |
| (Street)   |   |  |  | "       |   |  |              |   |   |         |                    |   |  | Line)  |   |  |                                      |  |                                |  |
| HOUSTON T  |   | X  | 77010                                      |         |   | X Form filed by One Reporting F Form filed by More than One I      |              |   |   |         |                    |   |  |  |   | •  |                                      |  |                                |  |
|  |   |  |  |         | -   |  |              |   |   |         |                    |   |  |  | Form fil<br>Person                                  |  | ore than                             | One Re   | porting                        | <sup>3</sup>   |
| (City) (State) (Zip)                                       |   |  |  |         |   |  |              |   |   |         |                    |   |  |  |   |  |                                      |  |                                |  |
|  |   | Tak  | ole I - No                                 | on-Deri | vativ   | e Se   | curit        | ies Ac                                  | quired  | l, Di   | sposed             | of, or B  | enefic                                     | ially  | Owned   |  |                                      |  |                                |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Da |   |  |  |         | r) E  | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year)        |              | 3.<br>Transaction<br>Code (Instr.<br>8) |   |         |                    |   | and Securities<br>Beneficiall<br>Owned Fol |  | Form<br>y (D) o                                     |  | ership<br>Direct<br>ndirect<br>r. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership            |                                |  |
|  |   |  |  |         |   |  |              |   | Code  | v       | Amount             | (A) or<br>(D)   | Price                                      | 1  | Reported<br>Fransaction<br>Instr. 3 and             |  |                                      |  | (Instr.                        | 4)   |
| Common Stock 1   |   |  |  | 12/06   | 12/06/2007  |  |              |   | G   | V       | 1,450              | D   | \$0  | )  | 1,047,74  | 2.22   | D                                    |  |                                |  |
| Common Stock   |   |  |  |         |   |  |              |   |   |         |                    |   |  | 40,000   |   | I  |                                      | Partnership  |                                |  |
|  |   |  | Table II                                   |         |   |  |              |   |   |         |                    | f, or Bei   |  |  | Owned   |  |                                      |  |                                |  |
|  |   |  |  |         | puts,   | call   | <del>-</del> |   | •   |         |                    | ible sec  |  |  |   |  |                                      |  |                                |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)        | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deen<br>Executio<br>if any<br>(Month/D | n Date, | Code (In:   |  | ion of E     |   | i. Date Exercisable and<br>Expiration Date<br>Month/Day/Year) |         | <b>:</b>           | 7. Title and Amount<br>of Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |  | 1  | 3. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) |                                      | 10.<br>Owners<br>Form:<br>Direct (I<br>or Indire<br>(I) (Instr | nip of<br>B<br>O) O<br>ect (li | 1. Nature of Indirect Beneficial Ownership Instr. 4) |
|  |   |  |  |         | Code  | ode V  |              |   | ate<br>Exercisal  |         | Expiration<br>Date | Title   | Amoun<br>or<br>Numbe<br>of Shai            | r  |   |  |                                      |  |                                |  |
| Option to<br>Buy<br>Common<br>Stock                        | \$36.9  |  |  |         |   |  |              |   | 12/05/200   | 07 1    | 2/02/2017          | Common<br>Stock   | 110,7                                      | 00   |   | 110,700  |                                      | D  |                                |  |
| Option to<br>Buy<br>Common<br>Stock                        | \$19.31   |  |  |         |   |  |              |   | 12/02/200   | 04 1    | 2/02/2014          | Common<br>Stock   | 88,00                                      | 00   |   | 88,000   |                                      | D  |                                |  |
| Option to<br>Buy<br>Common<br>Stock                        | \$33.17   |  |  |         |   |  |              |   | 12/06/200   | 06 1    | 2/06/2016          | Common<br>Stock   | 348,6                                      | 99   |   | 348,699 D  |                                      |  |                                |  |
| Option to<br>Buy<br>Common<br>Stock                        | \$32.39   |  |  |         |   |  |              |   | 12/07/200   | 05 1    | 2/07/2015          | Common<br>Stock   | 180,0                                      | 00   |   | 180,000  |                                      | D  | D                              |  |
| Option to<br>Buy<br>Common                                 | \$22.04   |  |  |         |   |  |              |   | 03/03/200   | 05 (    | 03/03/2015         | Common<br>Stock   | 200,0                                      | 00   |   | 200,0  | 000                                  | D  |                                |  |

**Explanation of Responses:** 

/s/ Robert L Hayter, by Power of Attorney

12/10/2007

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).