FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

mington, b.c. 20040	OMB AI

	OMB APPRO	OVAL						
	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

					OI	Seci	1011 30(11	) 01 1116	e invesimer	il Coi	ірапу Асі	01 194	,							
1. Name and Address of Reporting Person*  Angelle Evelyn M  (Last) (First) (Middle)  10200 BELLAIRE BLVD.  2NE-12A						Issuer Name and Ticker or Trading Symbol     HALLIBURTON CO [ HAL ]  3. Date of Earliest Transaction (Month/Day/Year) 07/19/2011										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owne				
																Officer (give title below)  Senior VP -Chie		Other (specify below) sef Acct. Officer		
(Street) HOUSTON TX 77072 (City) (State) (Zip)					_   4. Ii	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Indiv Line) X										vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
Date			2. Trans	action	ar)	2A. Dee Execution if any (Month/	med on Date	3. 4. Securiti Transaction Disposed Code (Instr. 5)			of, or Benefic ities Acquired (A) d Of (D) (Instr. 3, 4		A) or	5. Amou Securiti Benefic Owned	unt of es ially Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										v	Amount	(A) or (D) Pr		Price	Reported Transaction(s) (Instr. 3 and 4)					
Common	Stock			07/19/20		011					884(1	1) D \$		\$ <del>5</del> 3.9	6 39,9	75.95 <sup>(2)</sup>		D		
		Т	able II -						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. Deemond Execution if any (Month/Da	Date,		1. Fransaction Code (Instr.		າ of   I		6. Date Exercisable a Expiration Date (Month/Day/Year)			7. Title and Am of Securities Underlying Derivative Sect (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	is Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v			Date Exercisabl		opiration ate	Title	or Nu of	mber						
Option to Buy Common Stock	\$39.19								12/01/201	) 12	2/01/2020	Comm Stock		,400		5,400		D		
Option to Buy Common Stock	\$29.35								12/01/2009	9 12	2/01/2019	Comm Stoc		,100		7,100		D		
Option to Buy Common Stock	\$15.42								12/02/200	3 12	2/02/2018	Comm		.,300		11,300	)	D		
Option to Buy Common Stock	\$35.67								02/13/200	3 02	2/13/2018	Comm Stock		,500		5,500		D		
Option to Buy Common Stock	\$33.02								01/06/200	5 0:	./06/2016	Comm Stock		,800		2,800		D		
Option to Buy Common Stock	\$29.87								01/03/200	7 01	./03/2017	Comm		,300		3,300		D		
Option to Buy Common Stock	\$35.03								06/07/200	7 00	5/07/2017	Comm		,450		2,450		D		

## **Explanation of Responses:**

- 1. The sales were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on August 10, 2010.
- $2.\ Includes\ 476.36\ shares\ of\ stock\ purchased\ through\ the\ Halliburton\ Company\ Employee\ Stock\ Purchase\ Plan\ for\ the\ period\ ended\ June\ 30,\ 2011.$

## Remarks:

Robert L. Hayter, by Power of <u>Attorney</u>

07/20/2011

\*\* 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.