FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

Instruc	tion 1(b).			File								s Exchar pany Act		f 19	34			liouis	perie	эропос.	0.0
1. Name and Address of Reporting Person* Brown James S					Name								(Ch	ieck al	II appli Directo Officer	cable) or (give title	ng Per	10% Ov	wner		
(Last) 1125 177 SUITE 1	TH STREE	,	(Middle)		08/	/19/2	.011			`		ay/Year) (Month/D	uau/Vaar)			I		ent - Wes		Hemisphe	
(Street) DENVE		_	80202		- 4. 11	AIIIe	mumen	i, Dale	oi Oligi	illai Fi	ieu ((MOHUI)	ayrrear)		Line	e) <mark>X</mark>	Form f	iled by One	e Rep	orting Perso	on
(City)	(5		(Zip) le I - No	n-Deriv	/ative	Se	curiti	es Ac	auire	d. D	isn	osed (of. or F		eficial	ly O	wner				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			action	2 Eur) if	2A. Deemed Execution Date, f any Month/Day/Year)		3. Trai	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)		(A) or	or 5. Amou Securitie Benefici		nt of es ally Following	Forn (D) o	n: Direct or Indirect nstr. 4)	of Indirect Beneficial Ownership			
									Cod	le V	-	Amount	(A) (D)	or	Price	Tr (Ir	ansact	ion(s) and 4)	10% Owner give title Other (specify below) ont - Western Hemisphere Dint/Group Filing (Check Applicable ed by One Reporting Person ed by More than One Reporting t of (D) or Indirect (D) or Indirect (Instr. 4) 2.97(2) D 9. Number of derivative Securities Beneficially Ownership Form: Direct (D) or Indirect (Instr. 4) 9. Number of derivative Securities Beneficially Ownership Form: Direct (D) or Indirect (D) or Indirect (Instr. 4) 11. Nature of Indirect (D) or Indirect (D) or Indirect (D) or Indirect (Instr. 4)	(instr. 4)	
Common	Stock			08/19	/2011				D			83(1)	I)	\$38.0	4 3	367,6	02.97(2)		D	
		Т	able II -	Deriva (e.g., p												Ow	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any		4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)				7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		ecurity 4)	Derivativ Security (Instr. 5)		derivative Securities Beneficial Owned Following Reported	ly	Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Exp Dat	piration te	Title	N O	Amount or Number of Shares						
Option to Buy Common Stock	\$15.42								12/02/2	2008	12/	02/2018	Commo Stock	n 1	16,566			16,566	5	D	
Option to														Ť							

12/02/2010

12/01/2009

02/13/2008

01/06/2006

01/03/2007

Explanation of Responses:

\$39.19

\$29.35

\$35.67

\$33.02

\$29.97

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. Includes 613.50 shares of stock purchased through the Halliburton Company Employee Stock Purchase Plan for the period ended June 30, 2011.

Remarks:

Buy

Common Stock Option to Buy

Common

Common

Common

Common Stock

Stock Option to

Buy

Stock Option to Buy

Stock Option to Buy

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

08/23/2011

26,100

45,600

10,000

6.000

13,400

D

D

D

D

D

** Signature of Reporting Person

Common

Common

Stock

Common

Stock

Common

Stock

Common

26,100

45,600

10,000

6,000

13,400

12/02/2020

12/01/2019

02/13/2018

01/06/2016

01/03/2017

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.

^{*} 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).