FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden 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 Eychange Act of 1934

moduc	don I(b).			1-116						e Investmen					J -1								
1. Name and Address of Reporting Person* MCCOLLUM MARK A							2. Issuer Name and Ticker or Trading Symbol HALLIBURTON CO [HAL]											5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) EVP - Chief Intergration Ofc					
(Last) (First) (Middle) 3000 N. SAM HOUSTON PARKWAY E.						3. Date of Earliest Transaction (Month/Day/Year) 12/06/2016																	
(Street) HOUSTON TX 77032						4. If Amendment, Date of Original Filed (Month/Day/Year)											6. Individual or Joint/Group Filing (Check Applicabl Line) X Form filed by One Reporting Person Form filed by More than One Reporting						
(City) (State) (Zip)																	Perso	n 					
			le I - No			e Se				cquired,	Dis						1						
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						ar)	2A. Deemed Execution Date, if any (Month/Day/Year)			Code (I	ransaction Disposed ode (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			4 and Secur Benef Owne Repor		es ially Following d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										Code	V	Amount	- 0		Price	•	Transaction(s) (Instr. 3 and 4)						
Common Stock 12/06/												6,512			-	1.17	+			D			
Common Stock 12/07/						6 F 2,677(1) D \$53.9 189,304 Securities Acquired, Disposed of, or Beneficially Owned								9,304		D							
		'								s, option							wnea						
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,		Transaction Code (Instr		n of E		Expiration	6. Date Exercisable Expiration Date (Month/Day/Year)			and 7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		De Se	. Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A) (E		(D)	Date Exercisable		xpiration ate	Title	0 N	Amoun or Numbe of Shares								
Option to Buy Common Stock	\$38.95									12/02/2015	5 1	2/02/2025	Com Sto		50,40	0		50,400)	D			
Option to Buy Common Stock	\$40.75									12/03/2014	1 1	2/03/2024	Com Sto		16,40	0		46,400)	D			
Option to Buy Common Stock	\$50.62									12/04/2013	3 1	2/04/2023	Com Sto		35,40	0		35,400)	D			
Option to Buy Common Stock	\$33.5									12/05/2012	2 1	2/05/2022	Com Sto		14,10	0		44,100)	D			
Option to Buy Common Stock	\$35.57									12/06/2011	. 1	2/06/2021	Com Sto		33,20	0		33,200)	D			
Option to Buy Common Stock	\$39.19									12/01/2010) 1	2/01/2020	Com Sto		28,10	0		28,100		D			
Option to Buy Common Stock	\$35.67									02/13/2008	3 0	2/13/2018	Com Sto		11,50	0		11,500		D			
Option to Buy Common	\$36.9								_	12/05/2007	7 1	2/05/2017	Com		12,00	0		12,000		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.

Remarks:

<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.