FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-028									
Estimated average burden									
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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 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person* HACKETT JAMES T			2. Issuer Name and Ticker or Trading Symbol HALLIBURTON CO [HAL]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
HACKETT JAMES T										,			X	Director	•		10% Ov	·	
(Last)	/5	irot)	(Middle)				Date of Earliest Transaction (Month/Day/Year)								Officer (give title below)			Other (s	specify
(Last) (First) (Middle) 1201 LAKE ROBBINS DRIVE				06/30/2008										,			,		
1201 LAKE ROBBINS DRIVE																			
(Street)					4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
THE	т	v	77200										'	X	Form fil	ed by One	Repo	rting Persor	,
WOODL	LANDS T	X	77380													•		One Repor	
(City)	(S	state)	(Zip)												1 613011				
(,)																			
		Tal	ble I - Non	-Deriv	ativ	e Se	curities	Acq	uired,	Disp	1				Owned				
Date			Date			2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (A) i Of (D) (Instr. 3, 4		nd	5. Amount of Securities Beneficially Owned Following		Form (D) or	: Direct Indirect	7. Nature of Indirect Beneficial Ownership		
									Code V		Amount	Amount (A) or		,	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock															2,0	000		D	
			Table II - D)erivat	tivo	Sec	uritias A	Can	ired D	ienc	sed of	or Rene	ficiall	v 0	wned				
							s, warra								Wilcu				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	C	4. Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)			B. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
				Co	ode	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares	ər		(Instr. 4)	(-,		
Stock Equivalent Units	(1)	06/30/2008			A		198.11 ⁽²⁾		(3)		(3)	Common Stock	198.1	1	(4)	198.1	1	D	

Explanation of Responses:

- 1. The security converts to common stock on a one-for-one basis.
- 2. Stock equivalents acquired under the Halliburton Company Directors' Deferred Compensation Plan reported on a pro rata basis to reflect Issuer's Plan quarter. Said Plan is an ongoing securities acquisition plan.
- 3. The stock equivalent units were accrued under the Company's Directors' Deferred Compensation Plan and are settled in the Company's common stock upon cessation as a director.
- 4. On June 27, 2008, the closing price of Halliburton Company's Common Stock on the New York Stock Exchange was \$52.16.

Remarks:

Robert L. Hayter, by Power of Attorney 07/02/2008

** 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.