Г

## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

)	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
---	--

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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

1. Name and Address of Reporting Person* Rainey Joe D			2. Issuer Name and Ticker or Trading Symbol HALLIBURTON CO [ HAL ]	(Check	ationship of Reporting Pe < all applicable) Director Officer (give title	erson(s) to Issuer 10% Owner Other (specify
(Last) (First) (Middle) 14TH FLOOR CITIBANK BUILDING AL OUTA'EYAT ROAD		( )	3. Date of Earliest Transaction (Month/Day/Year) 12/15/2015		below) Pres., Eastern H	below) emisphere
(Street) DUBAI (City)	C0 (State)	00000 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	vidual or Joint/Group Fili Form filed by One Re Form filed by More the Person	porting Person

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date,	3.	ction	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		(A) or	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Stock	12/15/2015		D		2,685 <sup>(1)</sup>	D	\$38.01	209,203.51	D	

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr and 5	rities ired r osed ) : 3, 4	6. Date Exerc Expiration Da (Month/Day/M	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Option to Buy Common Stock	\$38.95							12/02/2015	12/02/2025	Common Stock	58,700		58,700	D	
Option to Buy Common Stock	\$40.75							12/03/2014	12/03/2024	Common Stock	59,500		59,500	D	
Option to Buy Common Stock	\$50.62							12/04/2013	12/04/2023	Common Stock	45,500		45,500	D	
Option to Buy Common Stock	\$33.5							12/05/2012	12/05/2022	Common Stock	37,933		37,933	D	
Option to Buy Common Stock	\$35.57							12/06/2011	12/06/2021	Common Stock	14,566		14,566	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:** 

Robert L. Hayter, by Power of 12/17/2015

\*\* Signature of Reporting Person Date

<u>Attorney</u>

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.