FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

OMB APPROVAL

3235-0287 OMB Number: 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 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

1. Name and Address of Departing Demon*							2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer						
1. Name and Address of Reporting Person* Nunez Craig W						HALLIBURTON CO [HAL]									(Check all applicable) Director 10% Owner							
															v (Office	r (give title		Other (s	·		
(Last)	(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)									oelow	•	t and	below) 1 Treasure	.		
1401 MCKINNEY STREET						02/05/2008										VIC	o i residen	t and	1 Treasure			
SUITE 2400							4 If Amendment Date of Original Filed (Mentle Day)									دمامه	laint/Craus	. Cilia	a (Chaal: An	unlinable		
Street)							If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Application)						
HOUSTON TX 77010															X Form filed by One Reporting Person Form filed by More than One Reporting							
					-											Form Perso		e tha	n One Repo	orting		
(City)	(S	tate)	(Zip)																			
		Tab	le I - Noi	n-Deriv	vative	Se	curiti	es Ad	quired	, Dis	posed	of, or	Ben	eficia	lly O	vne	d					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Executi			Code	Transaction Code (Instr. 5		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securi Benefi		ies	Forn (D) c	n: Direct or Indirect	7. Nature of Indirect Beneficial Ownership		
					(MOIIII/Da			Code	v	Amount		A) or D)	Price	— R Tı	eporte ansa	orted saction(s) tr. 3 and 4)			(Instr. 4)			
Common Stock 02/05/							2008				529(529 ⁽¹⁾ D \$		\$33.	73	19,870		D				
		T	able II -												y Owi	ned						
				(e.g., p	outs,	calls	s, wai	rrants	s, optio	ns, c	onverti	ble s	ecur	ities)								
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	Date, Transact				6. Date Exercisat Expiration Date (Month/Day/Year)) Ame Sec Und Deri		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Pric Deriv Secur (Instr	ative rity	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersl Form: Direct (Dor Indire (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal		xpiration ate	Title	1	Amount or Number of Shares								
Option to Buy Common Stock	\$36.9								12/05/20	07 12	2/05/2017	Comr		5,000			5,000		D			
Option to Buy Common Stock	\$33.17								12/06/20	06 12	2/06/2016	Comr		6,700			6,700		D			
Option to Buy Common	\$39.48								02/01/20	06 02	2/01/2016	Comr		6,000			6,000		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 1993 Stock and Incentive Plan. Said Plan permits Reporting Person to satisfy withholding tax obligation by transferring unrestricted shares to the Issuer.

Remarks:

Stock

Robert L. Hayter, by Power of

02/05/2008

<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.