



HALLIBURTON

Halliburton recognizes that the driving force behind any successful organization is its **people**. One way Halliburton strives to attract, motivate and retain employees is by offering a comprehensive Total Rewards package.

One component of Halliburton's Total Rewards package is the **Halliburton Benefits Program**, which enables you to meet financial obligations, prepare for retirement and maintain your health and wellness.

Benefits: One Part of Your Total Rewards

Total Rewards represents Halliburton's investment in the people the Company needs to succeed in today's competitive marketplace. Your individual contribution and performance can have a great impact on the total compensation you receive. Total Rewards at Halliburton may include the following:

1. Competitive Base Pay
2. Special Recognition and Rewards
3. Short- and Long-Term Incentives
4. Comprehensive Benefits
5. Variable Compensation
6. Career Opportunities
7. A Supportive Work Environment

Halliburton understands and appreciates the value of each and every employee and continually strives to provide comprehensive benefit programs such as retirement plans and health and wellness benefits, in addition to competitive salaries.

As you can see, the benefits you receive at Halliburton are one key element of your Total Rewards and Halliburton's investment in you. This guide will provide more information on Halliburton's benefit programs.

For information on the other elements of your Total Rewards, talk with your manager or your local Human Resources representative.

This guide will provide you with a broad overview of Halliburton's benefits. Please refer to the summary plan descriptions and/or plan documents for more details regarding the benefits described in this guide.

The Halliburton Benefit Program

Halliburton provides you and your family with benefit choices and the tools needed to access quality health care, assist with financial security and provide protection against the unexpected challenges in life.

The program provides:

- **Value** – Halliburton shares in the cost of your benefits to allow access to quality benefits at an affordable price.
- **Choice** – Halliburton believes no one knows your needs better than you. The benefit program is designed so you may choose the benefits that are right for you and your family, providing the level of security you need.
- **Convenience** – Halliburton knows your time is valuable. The Halliburton Benefits Center and its automated systems allow you to request and receive personalized information about your benefits online 24 hours a day, seven days a week or by phone, weekdays 7:30 a.m. to 7:30 p.m. CST.

Your Benefit Choices

Halliburton benefits fall into three categories: Health and Group Benefits, Retirement and Savings, and Other Programs. The following is a brief overview of these plans and programs.

- Medical
- Dental
- Vision
- Basic and Optional Life
- Basic and Optional Accidental Death and Dismemberment (AD&D)
- Basic and Optional Long-term Disability (LTD)
- Flexible Spending Accounts (FSA) and Health Savings Account (HSA)
- Flex Days
- Wellness
- Retirement and Savings

Eligibility

You are generally eligible to participate in the Health and Group benefit programs on your date of hire if you are a full-time or part-time employee regularly scheduled to work at least 20 hours per week. You are generally eligible to participate in the Retirement and Savings Plan benefits on your date of hire. Specific eligibility requirements are in place for both Health and Group Benefits and Retirement and Savings Plan benefits. Please refer to the applicable summary plan description for more details on these requirements.

Your eligible dependents generally include your lawful opposite-sex spouse and children under the age of 26. You can cover children to the age of 26 as your eligible dependents in the medical, dental and vision programs. Your children are not required to live with you, be listed on your tax returns as a dependent, or be a full-time student to qualify. Your child's spouse, domestic partner, or own children will not be eligible for coverage. Unmarried children up to age 25 can be enrolled in Child Life and Child Accidental Death & Dismemberment (AD&D) and do not need to be full-time students to be covered to age 25.

Your eligible dependents may participate in the following Health and Group benefit programs:

- Medical
- Dental
- Vision
- FSAs*
- HSA*
- Life Insurance
- AD&D
- Wellness

** Eligible dependents can be covered as long as such individuals qualify as your dependents for federal tax purposes.*

Health and Group Benefits

Enrollment and Coverage

Health and Group benefits are offered to maintain the health and financial well-being of you and your family. In order to receive coverage under most of the Health and Group benefits, you must enroll in the specific programs within 31 days of your date of hire. If you do not enroll in any of the Health and Group benefits during the initial enrollment period, you will not be able to enroll in these programs until the next Annual Enrollment period, unless you experience a qualified change-in-status event or a special enrollment event. If you do not enroll during the initial enrollment period, you will automatically be enrolled in the Company-paid Basic Life, Basic AD&D, Wellness program and 40 percent LTD coverage.

The Health and Group benefit program elections that you select remain in effect until Dec. 31 unless you experience a qualifying change-in-status event or have a special enrollment event.

Each year, during Annual Enrollment, you have the opportunity to make changes to your Medical, Dental, Vision, FSA, HSA, Life Insurance, AD&D, LTD and Flex Day elections. The elections you make during Annual Enrollment become effective on Jan. 1 of the following year (unless Evidence of Insurability (EOI) is required). If you do not make changes during Annual Enrollment, your prior year elections, including any FSA, Flex Days, optional life and AD&D elections, will carry over to the next year except where available options have changed. HSA elections do not roll over. You must make your HSA elections each year, although changes can be made at any time during the year.

Qualified Change-In-Status/Special Enrollment Event

In addition to Annual Enrollment, you may make certain changes to your benefit coverage elections during the year if you experience a qualified change-in-status and your election change is consistent with the qualified change-in-status event. In general, a qualified change-in-status may occur due to marriage, divorce, birth, adoption, dependent status change or death.

***Note:** Your Health and Group Benefits Summary Plan Description (SPD) provides a comprehensive chart of the coverage changes allowed if you have a qualified change-in-status or Special Enrollment Event.*

When you experience a life event that might affect your family status, contact Halliburton Benefits Center. If you experience a life event that impacts your employment status, you will automatically receive information about how your benefits are affected.

You are responsible for making any changes to your coverage elections within 31 days of the date of the change-in-status. You will be informed of any changes in the cost of your benefits. If you do not act within 31 days of the date of the qualified change-in-status, you will not be able to change coverage elections until the next Annual Enrollment period. Election changes to Optional Life Insurance and LTD coverage may be subject to EOI requirements. See the Health and Group Benefits SPD for details on EOI rules. Your new election choices become effective on the date of the qualified change-in-status provided the election is made within 31 days of the qualifying event (unless EOI is required), and the end of the month in which the change occurred if you are dropping coverage.

Annual Benefit Base Pay

Life, AD&D and LTD benefits as well as Flex Days are based on Annual Benefit Base Pay, as determined and reflected in your payroll records as of the previous Oct. 1. If you are hired after Oct. 1, your Annual Benefit Base Pay is based on your payroll records as of your benefits eligibility date. It generally does not include income received from:

- Commissions
- Bonuses
- Overtime pay
- Any other compensation
- Sources other than Halliburton.

Contributions

You make contributions for your Medical, Dental, Vision, FSA, HSA, LTD, Flex Days and AD&D premiums on a pre-tax basis. This usually lowers your taxes because your contributions are deducted from your pay before taxes are calculated. Life insurance premiums are post tax.

Tobacco-free employees and spouses will receive a 20 percent medical premium discount and qualify for discounted optional life premiums for remaining tobacco-free. To qualify for the non-tobacco-user discount, you must certify that you have not used any tobacco products in the past 12 months and that you will continue to refrain from using any tobacco products while you are receiving the non-tobacco-user discount. This certification is subject to Halliburton's Code of Business Conduct. Certain exceptions may be available if it is unreasonably difficult or medically inadvisable for you to quit using tobacco products.

Medical Programs

Halliburton offers the Preferred Provider Organization (PPO) or Deductible Medical Plan (DMP), depending on network availability, and the High Deductible Health Plan (HDHP) or out-of-area HDHP. The medical programs offer in- and out-of-network benefits, with higher coinsurance amounts when a network provider is used.

The chart below highlights key elements of the programs for comparison purposes. Refer to the SPD for additional information.

	PPO		Deductible Medical		HDHP		
	In-Network	Out-of-Network*	In-Network	Out-of-Network*	In-Network	Out-of-Network*	Out-of-Area*
Contributions	Log on to www.halliburton.com/totalrewards						
Deductible	\$500, or \$1,000 individual; Family 2x individual				\$3,000 individual/\$6,000 Family		
Out-of-Pocket	\$2,750/\$5,500	\$8,250/\$16,500	\$2,750/\$5,500		\$3,000/\$6,000	\$6,000/\$12,000	\$3,000/\$6,000
Coinsurance	80%	50%	80%	80%	100%	80%	100%
Routine Office Visit	\$20/\$30	50% after deductible	\$20/\$30	80% after deductible	100% after deductible	80% after deductible	100% after deductible
Annual Physical Exam	100%	50% after deductible	100%	80%	100%	80%	100%
Spending/Savings Accounts	General FSA				Limited FSA/HSA		

* Out-of-Network subject to Reasonable and Customary (R&C) limitations. Charges above R&C are the patient's responsibility.

Spousal Medical Surcharge

If you elect coverage for your spouse under a Halliburton medical program and your spouse has medical coverage offered through his or her employer, or retiree medical coverage through his or her former employer, you will pay a \$150 spousal medical surcharge each month for your elected medical coverage. This surcharge will be added to your monthly medical contribution on a pre-tax basis. The spousal medical surcharge does not apply to the HDHP or if your spouse is employed by Halliburton.

If your spouse does not have other coverage available, you must certify that fact as a new hire and at each Annual Enrollment period or be financially responsible for the surcharge. By doing so, you are certifying, subject to the Code of Business Conduct, that your spouse is not offered medical coverage through his or her employer or retiree medical coverage through his or her former employer.

Prescription Drugs

Prescription drug benefits are available in all of the medical programs described above. You may purchase prescriptions for up to a 30-day supply from a retail pharmacy or use the mail order pharmacy to order up to a 90-day supply for long-term or maintenance prescriptions. The prescription drug benefits consist of three tiers: generic, preferred brand and nonpreferred brand. Your cost is lowest when you use generics, higher when you use preferred brands and highest when you use nonpreferred brands. The charts on the next page highlight the benefits.

Prescription Drugs

PPO and DMP	Retail (30 day supply)			Mail Order (90 day supply)		
	% copay	At a minimum cost of:	Up to a maximum cost of:	% copay	At a minimum cost of:	Up to a maximum cost of:
Generic	N/A	Actual cost of drug	\$15	N/A	Actual cost of drug	\$30
Preferred Brand	25%	\$25	\$100	25%	\$65	\$200
Nonpreferred Brand	45%	\$45	\$100	45%	\$115	\$250
HDHP						
Retail or mail order	Plan pays 100% after deductible					

* Special conditions apply to certain specialty medications, refer to your Health & Group Benefits SPD for details.

Dental Programs

You have a choice of two dental programs – the Dental PPO Program (DPPO) or the Dental Health Maintenance Organization (DHMO) Program. In the DHMO Program, you must live in a DHMO area to be eligible and select an in-network dentist within the DHMO network in order to receive coverage. The following chart highlights both dental programs for you to compare.

Benefit Provisions	DHMO*	DPPO**
Individual Deductible	None	\$50
Preventive Services	Covered in full	Covered in full
Basic Services	Co-pay structure	80% after deductible
Major Services	Co-pay structure	50% after deductible
Orthodontia	Co-pay structure	50%
Lifetime Maximum	24-month treatment	\$1,500
Annual Maximum	None	\$1,500

* No benefits will be paid for services outside the network, except for emergency dental care.

** Out-of-network subject to reasonable and customary (R&C) limitations. Charges above R&C are the patients responsibility.

LiveWell Wellness Program

LiveWell is a comprehensive wellness program for you and your family. This wellness program provides the tools and resources to assist you in achieving a healthier lifestyle. Whether your goal is to quit using tobacco products, lose weight, reduce stress or get in shape, this program gives you the tools and support that empower you to make informed decisions about your health.

Vision Program

The Vision Program is a group program that helps you pay the cost of routine eye care expenses, such as eye exams, contact lenses and eyeglasses for you and your eligible dependents.

Vision	In-Network	Out-of-Network
Eye Exam	100% after \$10 co-pay	Up to \$36 after \$10 co-pay
Prescription Glasses* Lenses Single Vision Lined Bifocal Lined Trifocal	100% after \$10 co-pay	Up to \$28 after \$10 co-pay Up to \$45 after \$10 co-pay Up to \$56 after \$10 co-pay
Frames	Up to \$130 allowance after \$10 co-pay, 20% discount off amount over allowance	Up to \$45 after \$10 co-pay
Contact Lenses* instead of prescription glasses (not medically necessary)	Up to \$130 allowance for contacts and contact lens exam (fitting and evaluation to ensure the proper fit of contact lens materials)	Up to \$105 allowance
Medically Necessary Contact Lenses**	100% after \$10 co-pay (when specific criteria is met)	Up to \$210 after \$10 co-pay (when specific criteria is met)
Laser Vision Correction	Avg 15% discount off laser surgery through VSP contracted facilities	Not covered

* One pair of prescription glasses or contacts every plan year beginning in January, but not both in the same year.

** These conditions include aphakia, anisometropia, high ametropia, nystagmus, keratoconus and correction of extreme visual acuity problems that are not correctable with glasses, and following cataract surgery.

Flexible Spending Accounts (FSAs)

The Company offers health care (two types – General and Limited) and Dependent Day Care FSA as a smart and convenient way to receive tax savings as you use tax-free dollars to pay for eligible health care and dependent day care expenses. You can obtain reimbursements for eligible health and day care expenses from your pre-tax contributions and these reimbursements are generally not subject to any taxes.

It is important to carefully plan the amount you contribute to your FSA. Because of the tax benefits that FSAs provide, the Internal Revenue Code sets strict rules about how the accounts can be used. Four important rules imposed by the Code are:

- If you do not use all the money, you forfeit any unclaimed funds.
- You cannot share or transfer money between your Health Care and Dependent Day Care FSA accounts. They must remain separate.
- The money you contribute can only be used to pay for eligible expenses incurred during the same calendar year.
- You cannot stop or change your contribution during the year unless you have a qualifying change-in-status.

Visit the IRS website at www.irs.ustreas.gov and download Publication 502 and Publication 503 for more information on eligible health care and dependent day care expenses.

Enrollees in the General Health Care FSA and Limited Health Care Spending Account will be issued a PayFlex MasterCard with a limit equal to your annual FSA election. The card allows you to pay for eligible health care expenses at the point of service, avoiding the hassle of paying out-of-pocket. You must save receipts for purchases including those made with your PayFlex MasterCard so that you can provide substantiation of your purchase, when requested. You do not have to be enrolled in the Halliburton medical programs to participate.

You can access the full amount of your General Health Care FSA and Limited Expense Health Care Spending Account contribution elections for reimbursement on Jan. 1 of the plan year even if your contributions have not yet been deducted from your payroll check. However, you must incur eligible expenses during the calendar year or your contributions will be forfeited.

General Health Care Flexible Spending Account (HCFSA)

If you are enrolled in the PPO or DMP you may elect a General Health Care FSA and set aside \$120 to \$5,000 per year. You may use the money in this account for eligible medical, dental, vision, pharmacy and hearing care expenses that are not covered by your health program. Eligible expenses include but are not limited to:

- Medical and dental deductibles and co-pays/coinsurance
- Orthodontia treatment not covered by dental insurance
- Vision care not covered by vision insurance
- Prescription drug co-pays/coinsurance
- Mental health and substance abuse treatment not covered by insurance

Limited Expense Health Care Spending Account

If you enroll in the HDHP, you may elect a Limited Expense Health Care Spending Account and set aside \$120 to \$5,000 per year. Eligible expenses include but are not limited to:

- Medical, mental health, substance abuse and prescription expenses only after the medical deductible is met
- Eligible dental expenses not covered by the plan
- Orthodontia treatment not covered by dental insurance
- Vision care not covered by vision insurance

Dependent Day Care Flexible Spending Account (FSA)

Contributions to the Dependent Day Care FSA can be used to help pay for most dependent day care expenses for your children under age 13 and for qualifying older relatives, including dependent parents, if claimed as a dependent on your Federal tax return. Care must be provided so that you and your spouse can work, attend school or look for a job.

You can generally contribute from \$120 up to \$5,000 to the Dependent Day Care FSA, with the following exceptions:

- If you participate in the Dependent Day Care FSA and your spouse participates in a similar account through his or her own employer, your combined amounts cannot exceed \$5,000 per year.
- If you are married and you and your spouse file separate tax returns, the maximum you can each contribute is \$2,500 per year.
- If you are married and you and your spouse file a joint tax return, the maximum you can contribute is \$5,000 per year.
- If either you or your spouse earns less than \$5,000 a year, you may contribute only as much as the pay of the lower paid spouse.
- In general, you may not participate in the Dependent Day Care FSA if your spouse does not work outside the home. There are two exceptions: if your spouse is physically or mentally unable to care for himself or herself, or if he or she is a full-time student. To qualify as a full-time student, your spouse must be enrolled at and attend school on a full-time basis for some part of five calendar months during the year for claims where service dates are already completed on the date the claim is processed.

You can access your Dependent Day Care FSA contributions for reimbursement only after they have been deducted from your payroll check and deposited to your Dependent Day Care FSA, and for expenses already incurred. Enrollees in the Dependent Day Care FSA will be issued a PayFlex MasterCard with a limit equal to your payroll contributions that have been deposited into your Dependent Day Care FSA.

Health Savings Account (HSA)

If you are enrolled in the HDHP, you can take advantage of the HSA. The HSA is a tax-free savings account individually owned and can be used to pay for current or future qualified medical expenses for you and your eligible family members. You can decide how much you would like to contribute, when and how to spend the money on eligible healthcare expenses, and how to invest the balance. The balance will remain in the account and is not subject to forfeiture. If you open a Chase HSA, you will be able to contribute to your HSA through convenient pre-tax payroll deductions. Halliburton will make annual, prorated contributions to all HSA-eligible employees who enroll in the HDHP and elect to open an HSA with Chase. The annual \$250 tax-free contribution from Halliburton for single coverage and \$500 for family coverage will be prorated based on your benefits eligibility date. You can make after-tax contributions to an HSA sponsored by any other institution and claim the deposits as a deduction when you file your income taxes. Below are the eligibility requirements for participation in an HSA:

1. It must be paired with the HDHP
2. You cannot be covered by any first-dollar medical coverage
3. You cannot be enrolled in Medicare
4. You cannot be claimed as a dependent on someone's tax return

2011 HSA contribution limits (keep in mind that this will include the Halliburton contribution)

- Individual \$3,050
- Family \$6,150
- If you are 55 or older, you can deposit up to an additional \$1,000

For more information, visit

www.ustreas.gov/offices/public-affairs/hsa.

Life Insurance

Life insurance helps protect your family from a sudden loss of income in the event of your death. Halliburton provides you with Basic Employee Life Insurance equal to one times your Annual Benefit Base Pay, up to a maximum of \$50,000. If you want more financial security, you can choose optional life insurance for yourself, as well as your spouse and children.

Coverage	Optional Life Insurance
Employee*	Increments of 1 to 6 times annual benefits base pay, up to \$3 million including basic
Spouse*	\$10,000 or from 1/2 to 3-1/2 times employee's annual benefits base pay. Coverage cannot exceed the lesser of the employee coverage amount (including basic coverage) or \$250,000
Child(ren) under age 25	\$10,000

* May require evidence of insurability (EOI)

Accidental Death and Dismemberment Insurance

The Accidental Death and Dismemberment (AD&D) Program is designed to pay a benefit to you if you are seriously injured in an accident, or to your beneficiary in the event of your death from an accident. Halliburton provides you with a Basic AD&D benefit equal to one times your Annual Benefit Base Pay, up to a maximum of \$200,000. You may choose optional AD&D insurance for yourself, as well as your spouse and children.

Coverage	Optional AD&D
Employee	In increments of \$50,000 from \$50,000 to the lesser of \$1 million or 10 times your Annual Benefit Base Pay
Spouse	\$50,000 increments from \$50,000 to the lesser of \$1 million or 10 times employee's Annual Benefit Base Pay; cannot exceed employee coverage amount
Child(ren) under age 25	\$50,000

Medical Leave of Absence (MLOA)

Medical Leave of Absence is available for up to 26 weeks per calendar year (based on the covered employee's regularly scheduled workweek) and includes any paid or unpaid MLOA which may include incidental sick days, occupational and non-occupational MLOA. Extended MLOA is available if you require more than 26 weeks of MLOA during the year.

An employee with less than six months of credited service is not entitled to any MLOA pay, but would be eligible for an unpaid MLOA. Employees who are not eligible for MLOA pay must still be managed by the Medical and Disability (M&D) Department for a non-occupational MLOA or the Occupational Injury Administration (OIA) Department for an occupational MLOA.

- MLOA for up to 26 weeks
(May be paid or unpaid in whole or in part)
- Extended MLOA for up to 18 months
(Extended MLOA is always unpaid)

Length of Credited Service	MLOA (Time off)	MLOA (Pay)
Less than six months	Yes	No
Six months or more	Yes	Yes

Long-Term Disability Insurance

Long-Term Disability Insurance is designed to help if you face financial hardship due to an extended disability. Halliburton provides LTD coverage equivalent to 40 percent of your Annual Benefit Base Pay. You may buy optional coverage of 10 percent or 20 percent of Annual Benefit Base Pay to add to your Basic LTD of 40 percent. The maximum LTD benefit is \$25,000 a month.

Flex Days

Halliburton provides you the opportunity to purchase extra days off, if eligible. These extra days, called Flex Days, are in addition to the regular vacation days for which you may be eligible. Before electing to purchase Flex Days, check with your manager to avoid scheduling conflicts. If you do not use your Flex Days during the calendar year elected, they will be forfeited without refund.

Retirement and Savings

The Halliburton Retirement and Savings (R&S) Plan can help you prepare for your financial future. The Halliburton R&S Plan helps you save for retirement and other long-term financial goals. Understanding the following R&S Plan features will help you get the most benefit from the R&S Plan.

Automatic Enrollment

To encourage you to begin saving, you will automatically be enrolled at a contribution rate of four percent of your eligible compensation per pay period after 30 days of employment unless you affirmatively take action to opt out of the R&S Plan. If you are automatically enrolled, your contribution rate will also be automatically increased one percent each January for three years beginning with the January following the first anniversary of your date of hire until your contribution rate reaches seven percent. All tax-deferred contributions made to the R&S Plan under the automatic enrollment process will be invested in the Moderate Premixed Portfolio unless you affirmatively take

action to change this investment election. You may opt out of or change any of the automatic enrollment provisions at any time.

Your Contributions

You are allowed to contribute from one percent to 50 percent of your eligible pay, per pay period, on a tax-deferred basis subject to certain IRS limitations. With 12 funds from which to choose, you can select an investment allocation and level of risk that is right for you.

Company Matching Contributions

Halliburton will match 100 percent of your tax-deferred contributions, up to a maximum of four percent of eligible pay, per pay period and 50 percent of your tax-deferred contributions that are greater than four percent but less than or equal to six percent of eligible pay, per pay period.

Halliburton Basic Contribution

Generally, if you are an active employee (or on an approved leave of absence) on Dec. 31, the Company will contribute four percent of your eligible annual compensation to the R&S Plan each year. You do not have to be contributing to the R&S Plan to receive a Basic Contribution. You will also receive an allocation of this Basic Contribution if you terminate your employment with the Company during the year as a result of death, retirement or disability (as defined in the Plan).

Vesting

- The R&S Plan provides immediate 100 percent vesting of your tax-deferred and rollover contributions, as well as any earnings on those contributions.
- The R&S Plan matching contributions, as well as any earnings on those contributions, become 100 percent vested after two years of vesting service.
- The R&S Plan Basic Contribution, as well as any earnings on those contributions, become 100 percent vested after three years of vesting service.

Company Match and Basic Contribution Illustration

Your Contribution Percentage*	Company Match	Basic Contribution**	Total Company Contribution**
0%	0%	4%	4%
1%	1%	4%	5%
2%	2%	4%	6%
3%	3%	4%	7%
4%	4%	4%	8%
5%	4.5%	4%	8.5%
6%	5%	4%	9%
>6%	5%	4%	9%

* Percentages represent a percentage of your eligible Retirement and Savings Plan pay.

**Generally, you must be employed on Dec. 31 to be eligible to receive the Basic Contribution.

Other Programs

Your Total Rewards

Halliburton's investment in you includes other forms of compensation, retirement plans, health and wellness benefits and career development. Your Total Rewards statement provides you with a detailed summary of your Total Rewards over the past 12 months.

Dispute Resolution Program (DRP)

DRP gives employees an improved process and flexible options for airing and settling almost every kind of workplace conflict.

Participant Advocacy Program

The Participant Advocacy Program is available to assist employees enrolled in a Halliburton health care program with unresolved claim issues. Participant Advocacy is available by contacting the Halliburton Benefits Center.

Employee Assistance Program

The Employee Assistance Program (EAP) is available to assist you and your eligible dependents with family, financial, personal and emotional issues. There is no charge for services provided directly by EAP staff members, and some cost for mental health and substance abuse counseling may be covered by the Halliburton Medical Programs.

Holidays

Halliburton offers seven paid U.S. national holidays and two personal paid days (in lieu of Company-designated floating holidays). Personal days may be taken at the employee's discretion, subject to manager's approval.

Vacation

Eligible employees are granted time off with pay according to their years of service based on the employee's adjusted service date. As years of continuous service increases, weeks of vacation eligibility also increase up to:

Length of Service	Weeks of Vacation Pay
Less than 5 years	2
5 years but less than 10 years	3
10 years but less than 25 years	4
25 or more years	5

MVP Award

The Maximizing Value-Added Performance (MVP) program provides cash awards to recognize outstanding achievements

of individuals and teams that benefit the Company and its shareholders. MVP promotes positive reinforcement of good employee efforts.

STARS Award

Halliburton offers an "on the spot" recognition program in the U.S. to allow management to recognize employees by "Saying Thanks and Recognizing Success" for their outstanding job performance by presenting them with a Visa gift card in amounts from \$50 to \$200.

Employee Stock Purchase Program (ESPP)

Eligible employees can participate in the Halliburton ESPP, which allows you to purchase Halliburton stock at a discount through regular payroll deductions. The ESPP makes it easy for you to become a shareholder in the Company and to participate in its potential future growth and profitability.

Halliburton Total Rewards & Halliburton Benefits Center

The Halliburton Total Rewards site uses advanced technology that allows you to enroll, access, request and receive information about your benefit programs and to view your accounts – either from home or work.

The Halliburton Benefits Center (HBC) is your primary resource for personal benefit information and customer service. There are two ways to connect with the HBC.

1. Halliburton Total Rewards website: You can log on to the site from any computer with Internet access at www.halliburton.com/totalrewards. (24 hours a day, 7 days a week)
2. An HBC representative: If you have questions about your Health and Group Benefits or Retirement and Savings Plan benefits, you may contact an HBC representative for personal service by calling 866-321-0964 (if dialing international use your country's AT&T access number) or 857-362-5980 from 7:30 a.m. to 7:30 p.m. Central Time, Monday through Friday, except holidays.

To access the Halliburton Total Rewards website for the first time, you will need to:

- Go to www.halliburton.com/totalrewards.
- Click on the "Register Account" button.
- Enter your Social Security number.
- Enter your last name.
- Enter your date of birth (MMDDYYYY).

At this point, you will need to:

- Create a unique User Name of at least six characters.
- Create a unique Password that consists of at least six characters, which must include a number and a letter.
- Provide answers to two security questions in order to automatically reset your User Name or Password if you forget it.
- You can provide a preferred e-mail address where you want your benefits information sent. The preferred e-mail address will also be used to help you reset your account if you forget your User Name or Password.

Next Steps for New Employees

What will I receive as a new employee?

If you are eligible, enrollment material will be mailed to your permanent home address within two weeks of your date of hire. This material will provide more detailed information about the enrollment process and benefits program options available to you, including your health and group benefits enrollment deadline.

How long do I have to enroll?

You will have 31 days from the date printed on the enrollment material to enroll in your health and group benefit coverage; refer to the enrollment deadline in your enrollment material. Although you are eligible for health and group benefits coverage from your hire date, you must enroll within the required 31 days to activate coverage. Remember, you will automatically be enrolled to contribute four percent of your eligible pay to the Retirement and Savings Plan. There is no deadline to change your contribution rate to the Retirement and Savings Plan. Changes to your contribution rate may be made at any time. Changes generally take effect within one to two pay periods. If you do not receive your enrollment materials by mail within two weeks of your hire date, contact the HBC immediately for assistance.

What if I need additional help?

You should speak to a HBC representative at 866-321-0964 (if dialing international use your country's AT&T access number) or 857-362-5980.

When do my benefits become effective?

If you enroll within 31 days, your Health and Group Benefits coverage begins on your date of hire. Your Retirement and Savings Plan contributions will begin as soon as administratively possible.

Keep Your Address Up-to-Date

Throughout the year, important benefits-related materials will be mailed to your permanent mailing address. If your mailing address changes, be sure to update your address via the Employee Self-Service (ESS) website, or notify your local Human Resources representative for assistance if you do not have access to update online. Address changes made through ESS are updated with HBC daily (Monday – Friday).

Accessing Health Care Before You Enroll and/or Receive ID Cards

In the case of an emergency – If the emergency occurs within the first 31 days of your employment, you will be eligible for medical benefits provided you enroll during the eligibility period. You may be required to pay your expenses and submit a claim for reimbursement.

If an emergency occurs after your 31-day enrollment period expired and you did not enroll in medical benefits, you will not be eligible for coverage.

Medical services – For routine office visits, please contact the HBC for assistance with your coverage verification. Again, you are eligible for coverage and can receive medical services prior to enrollment but you must enroll within the required timeline to receive the program's benefits.

To have a prescription filled – You may be required to pay all charges to the pharmacy up front. Once you have received your prescription drug card, follow your program's instructions for submitting a claim. If the drug is covered, you will be reimbursed, up to the program coverage limits.

If you are enrolled in one of Halliburton's medical programs and have not received your ID card, your pharmacist may call Medco at 1-800-669-3589. Your pharmacist will need your Social Security number to verify coverage. If Medco has received your eligibility information, you will only pay the amount required by the prescription program.

Disclaimer

Halliburton designed this brochure to provide you with a broad overview of the benefit programs offered to U.S. employees in effect as of Jan. 1, 2011. More detail and information regarding the benefits offered under the Halliburton Energy Services, Inc. Welfare Benefits Plan and the Halliburton Retirement and Savings Plan is outlined in the applicable plan documents and Summary Plan Descriptions. The Summary Plan Descriptions are available online through HalWorld. If the information in this brochure differs from, or conflicts with, the provisions in the applicable plan document or Summary Plan Description, the terms of the applicable plan document or Summary Plan Description shall control.

There are no guarantees that participation under the Plan(s) or benefit programs described in this material will remain unchanged in future years. Halliburton reserves the right to change, suspend, amend or terminate the Plan(s) and/or benefit programs described in this material at any time, in whole or in part. This means that the Plan(s) and/or benefit programs may be:

- Discontinued in their entirety
- Changed to provide different levels of benefits
- Changed to provide for different cost sharing between the Company and participants
- Changed in any other way.

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