

HELMERICH & PAYNE, INC.

Reported by **FEARS DOUGLAS E**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 08/12/05 for the Period Ending 08/11/05

Address 1437 S. BOULDER AVE. SUITE 1400

TULSA, OK, 74119

Telephone 918-742-5531

CIK 0000046765

Symbol HP

SIC Code 1381 - Drilling Oil and Gas Wells

Industry Oil & Gas Drilling

Sector Energy

Fiscal Year 09/30



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

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

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 Reporting Person *					2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
FEARS DO	UGLAS :	E		Н	ELI	MER	ICH & I	PAY	YNE	INC [HP]		oncable)			
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)							Director 10% Owner Other (specify below)				
1437 SOUTH BOULDER AVE.						8/11/2005						Vice Presider	it & CFO			
	(Str	reet)		4.	If A	nendm	ent, Date (Origi	inal Fi	led (MM/I	DD/YYYY)	6. Individual o	or Joint/G	roup Filing (Check Appl	icable Line)
TULSA, OK 74119 (City) (State) (Zip)												X Form filed by One Reporting Person Form filed by More than One Reporting Person				
	(3)			Non-Dei	rivat	ive Sec	curities Ac	equi	red, D	isposed	of, or Ber	neficially Owne	ed			
1.Title of Security (Instr. 3) 2. Trans. Da]	Execution Date, if any		3. Trans. Coo (Instr. 8)	de 4. Securities Ac Disposed of (D) (Instr. 3, 4 and 5		ed of (D)	, ,	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. 7. Nature Ownership Form: Beneficial	
							Code	v	Amoun	(A) or (D)	Price				Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock 8/11/2005							M		100	A	\$22.6636	20438		D (1)		
Common Stock 8/11/2005				1/2005			S		100	D	\$60.10	20338		D (1)		
	Tab	ole II - Der	ivative Se	curities	Bene	eficially	y Owned (e.g.	. , puts	s, calls, v	varrants,	options, conve	rtible sec	urities)		
1. Title of Derivate Security (Instr. 3)	Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Deemed Execution Date, if any	(Instr. 8)	Acquir Dispos			6. Date Exercisable and Expiration Date		7. Title and Securities U Derivative S (Instr. 3 and	Jnderlying Security	Derivative Security	Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Security			Code	V	(A)	(D)	Date Exer	e rcisable	Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Stock Option (right to buy)	\$22.6636	8/11/2005		M			100		5/2002 (2)	12/5/2011	Common Stock	100	\$0.00	33227	D	

Explanation of Responses:

- (1) Includes 141 shares held indirectly in the reporting person's 401(k) account.
- (2) These options were granted under the Helmerich & Payne, Inc. 2000 Stock Incentive Plan on 12/05/01 at an exercise price of \$29.78, which became \$22.6636 post-spinoff. These option vest over 4 years in 25% increments. The noted dates represents the date options first begin to vest.

Reporting Owners

reporting owners								
Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Relationships rOfficer Vice President & CFO	Other				
FEARS DOUGLAS E								
1437 SOUTH BOULDER AVE.			Vice President & CFO					
TULSA, OK 74119								

Signatures

/s/ Jonathan M. Cinocca, by Power of Attorney for Douglas E. Fears

**Signature of Reporting Person

8/12/2005

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 control number.