

HELMERICH & PAYNE, INC. Filed by STATE FARM MUTUAL AUTOMOBILE INSURANCE CO

FORM SC 13G/A

(Amended Statement of Ownership)

Filed 01/31/12

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

SCHEDULE 13G

Under the Securities Exchange Act of 1934 (Amendment No. ____)*

27

HELMERICH & PAYNE, INC.

(Name of Issuer)

COMMON SHARES

(Title of Class of Securities)

423452101 (Cusip Number)

12/31/2011 (Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

[X] Rule 13d-1(b)
[] Rule 13d-1(c)
[] Rule 13d-1(d)

*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

Schedule 13G Page _____ of ____ Pages 2 10

CUSIP No. ___423452101

Name of Reporting Person and I.R.S. Identification No.: State Farm Mutual Automobile Insurance Company 37-0533100 Check the appropriate box if a Member of a Group (a) _ (b) __X_ SEC USE ONLY: Citizenship or Place of Organization: Illinois 5. Sole Voting Power: 8,257,200 Number of Shares Beneficially 6. Shared Voting Power: 26,228 Owned by 7. Sole Dispositive Power: 8,257,200 Each Reporting Person With 8. Shared Dispositive Power: 26,228

	Aggregate Amount Beneficially Owned by each Re	eporting Person: 0,203,420
10.	Check Box if the Aggregate Amount in Row 9 exc	- cludes Certain Shares:
11.	Percent of Class Represented by Amount in Row	- 9: 7.72 %
12.	Type of Reporting Person: IC	-
Sch	nedule 13G	Page of Pages
CUSI	TP No423452101	_
1.	Name of Reporting Person and I.R.S. Identification State Farm Life Insurance Company 37-0533090	
2.	Check the appropriate box if a Member of a Gro	- pup
	(b)X	_
3.	SEC USE ONLY:	_
4.	Citizenship or Place of Organization: Illinois	3
	mber of 5. Sole Voting Power: 0	
	neficially 6. Shared Voting Power: 5,925	
Eac	•	
_	rson With 8. Shared Dispositive Power: 5,925	
9.	Aggregate Amount Beneficially Owned by each Re	eporting Person: 5,925
10.	Check Box if the Aggregate Amount in Row 9 exc	cludes Certain Shares:
11.	Percent of Class Represented by Amount in Row	9: 0.01 %
12.	Type of Reporting Person: IC	-
Sch	nedule 13G	
	icaule 130	Page of Pages 10
	IP No423452101	Page of Pages 10
		- ation No.:
CUSI	Name of Reporting Person and I.R.S. Identificate Farm Fire and Casualty Company 37-05330 Check the appropriate box if a Member of a Gro(a)	- ation No.: 080
CUSI 1.	Name of Reporting Person and I.R.S. Identifications State Farm Fire and Casualty Company 37-05330 Check the appropriate box if a Member of a Gro	- ation No.: 080
CUSI 1.	Name of Reporting Person and I.R.S. Identificate Farm Fire and Casualty Company 37-05330 Check the appropriate box if a Member of a Gro(a)	- ation No.: 080
CUSI 1. 2.	Name of Reporting Person and I.R.S. Identifications State Farm Fire and Casualty Company 37-05336 Check the appropriate box if a Member of a Gro(a)(b)X	- ation No.: 080 - pup
2. 3. 4.	Name of Reporting Person and I.R.S. Identificate State Farm Fire and Casualty Company 37-05330 Check the appropriate box if a Member of a Gro(a)(b)X SEC USE ONLY: Citizenship or Place of Organization: Illinois wher of 5. Sole Voting Power: 0	- ation No.: 080 - pup
2. 3. Num Sha Ben	Name of Reporting Person and I.R.S. Identificate State Farm Fire and Casualty Company 37-05336 Check the appropriate box if a Member of a Group (a)	- ation No.: 080 - pup
2. 3. 4. Num Sha Ben Own Eac	Name of Reporting Person and I.R.S. Identifications State Farm Fire and Casualty Company 37-05330 Check the appropriate box if a Member of a Ground (a)	- ation No.: 080 - pup
2. 3. 4. Num Sha Ben Own Eac Rep	Name of Reporting Person and I.R.S. Identification State Farm Fire and Casualty Company 37-05336 Check the appropriate box if a Member of a Group (a)	- ation No.: 080 - pup
2. 3. 4. Num Sha Ben Own Eac Rep	Name of Reporting Person and I.R.S. Identifical State Farm Fire and Casualty Company 37-05336 Check the appropriate box if a Member of a Grown (a)	ation No.: 180 - Dup
2. 3. 4. Num Sha Ben Own Eac Rep Per	Name of Reporting Person and I.R.S. Identifical State Farm Fire and Casualty Company 37-05336 Check the appropriate box if a Member of a Ground (a)	ation No.: 080 - bup
3. 3. 4. Num Sha Ben Own Eac Rep Per	Name of Reporting Person and I.R.S. Identifical State Farm Fire and Casualty Company 37-05330 Check the appropriate box if a Member of a Ground (a)	ation No.: 080 - pup
3. 4. Num Sha Ben Own Eac Rep Per 9.	Name of Reporting Person and I.R.S. Identifical State Farm Fire and Casualty Company 37-05330 Check the appropriate box if a Member of a Grown (a)	ation No.: 080 - pup
3. 4. Num Sha Ben Own Eac Rep Per 10. 11.	Name of Reporting Person and I.R.S. Identifical State Farm Fire and Casualty Company 37-05336 Check the appropriate box if a Member of a Grown (a)	ation No.: 080 - pup
3. 3. 4. Num Sha Ben Own Eac Rep Per 9. 10. 11. 12. sch	Name of Reporting Person and I.R.S. Identifical State Farm Fire and Casualty Company 37-05336 Check the appropriate box if a Member of a Grown (a)	Tation No.: 1880

^{2.} Check the appropriate box if a Member of a Group

(b) <u>X</u>	
3. SEC USE ONLY:	
4. Citizenship or Place of Organization: Delaware	
Number of 5. Sole Voting Power: 0 Shares	
Beneficially 6. Shared Voting Power: 4,164 Owned by	
Each 7. Sole Dispositive Power: 0 Reporting	
Person With 8. Shared Dispositive Power: 4,164	
9. Aggregate Amount Beneficially Owned by each Reporting	ng Person: 4,164
10. Check Box if the Aggregate Amount in Row 9 excludes	Certain Shares:
11. Percent of Class Represented by Amount in Row 9: 0.0	00 %
12. Type of Reporting Person: IC	
Schedule 13G Page _	of Pages 6 10
CUSIP No423452101	
1. Name of Reporting Person and I.R.S. Identification N State Farm Insurance Companies Employee Retirement T	
2. Check the appropriate box if a Member of a Group	
(a) (b)X	
3. SEC USE ONLY:	
4. Citizenship or Place of Organization: Illinois	
Number of 5. Sole Voting Power: 0	
Shares Beneficially 6. Shared Voting Power: 3,586	
Owned by Each 7. Sole Dispositive Power: 0	
Reporting Person With 8. Shared Dispositive Power: 3,586	
9. Aggregate Amount Beneficially Owned by each Reporting	ng Person: 3,586
10. Check Box if the Aggregate Amount in Row 9 excludes	Certain Shares:
11. Percent of Class Represented by Amount in Row 9: 0.0	00 %
12. Type of Reporting Person: IC Schedule 13G Page _	of Pages
	7 10
Item 1(a) and (b). Name and Address of Issuer & Principa	al Executive Offices:
HELMERICH & PAYNE, INC.	
1437 SOUTH BOULDER AVE. SUITE 1400 TULSA, OK 74119-3623	
Item 2(a). Name of Person Filing: State Farm Mutual Auto	omobile Insurance
Company and related en and Exhibit A	ntities; See Item 8
Item 2(b). Address of Principal Business Office: One Sta	ate Farm Plaza
Bloomin	ngton, IL 61710
<pre>Item 2(c). Citizenship: United States</pre>	
Item 2(d) and (e). Title of Class of Securities and Cusi	p Number: See above.

(a) ____

Item 3. This Schedule is being filed, in accordance with 240.13d-1(b).

See Exhibit A attached.

Item 4(a).	Amount Beneficially Own	ned: 8,300,569 shares			
Item 4(b).	Percent of Class: 7.73	percent pursuant to Rule 13d-3(d)(1).			
Item 4(c).	Number of shares as to	which such person has:			
		(ii) Shared power to vot (iii) Sole Power to disp	or to direct the vote: 8,257,200 te or to direct the vote: 43,369 cose or to direct disposition of: 8,257,200 spose or to direct disposition of: 43,369			
Item 5.	Owi	nership of Five Percent	or less of a Class: Not Applicable.			
Item 6.	Owi	Ownership of More than Five Percent on Behalf of Another Person: N/				
Item 7.	Ide	entification and Classif	ication of the Subsidiary Which Acquired			
	the	e Security being Reporte	ed on by the Parent Holding Company: N/A			
Item 8.	Ide	Identification and Classification of Members of the Group:				
	Se	e Exhibit A attached.				
Item 9.	No	tice of Dissolution of G	roup: N/A			
Schedu	le 1	3G	Page of Pages 10			
my kn acqui for t influ not a trans After I cer	owled red: he prencing cquiraction reas tify	dge and belief, the secular the ordinary course of and do not having the control of the is red in connection with con having such purpose of sonable inquiry and to the control of the control of the interest of the control of the inquiry and to the control of th	ning below I certify that, to the best of drities referred to above were of business and were not acquired the effect of changing or sever of such securities and were or as a participant in any or effect. Signature The best of my knowledge and belief, et forth in this statement is true,			
		01/25/2012	STATE FARM MUTUAL AUTOMOBILE			
		Date	INSURANCE COMPANY			
			STATE FARM LIFE INSURANCE COMPANY			
			STATE FARM FIRE AND CASUALTY COMPANY			
STATE	FARI	M INSURANCE COMPANIES	STATE FARM INVESTMENT MANAGEMENT			

CORP.

FUND

/s/ Paul N. Eckley

EMPLOYEE RETIREMENT TRUST

STATE FARM INSURANCE COMPANIES

SAVINGS AND THRIFT PLAN FOR

U.S. EMPLOYEES

STATE FARM ASSOCIATES FUNDS

STATE FARM ASSOCIATES FUNDS
TRUST - STATE FARM BALANCED

STATE FARM MUTUAL FUND TRUST

TRUST - STATE FARM GROWTH FUND

Paul N. Eckley, Fiduciary of each of the above Schedule 13G Paul N. Eckley, Vice President of each of the above

Page _____ of ____ Pages

EXHIBIT A

This Exhibit lists the entities affiliated with State Farm Mutual Automobile Insurance Company ("Auto Company") which might be deemed to constitute a "group" with regard to the ownership of shares reported herein.

Auto Company, an Illinois-domiciled insurance company, is the parent company of multiple wholly owned insurance company subsidiaries, including State Farm Life Insurance Company, and State Farm Fire and Casualty Company. Auto Company is also the parent company of State Farm Investment Management Corp. ("SFIMC"), which is a registered transfer agent under the Securities Exchange Act of 1934 and a registered investment advisor under the Investment Advisers Act of 1940. SFIMC serves as transfer agent and investment adviser to State ${\tt Farm\ Associates'\ Funds\ Trust,\ State\ Farm\ Variable\ Product\ Trust,\ and}$ State Farm Mutual Fund Trust, three Delaware Business Trusts that are registered investment companies under the Investment Company Act of 1940. Auto Company also sponsors two qualified retirement plans for the benefit of its employees, which plans are named the State Farm Insurance Companies Employee Retirement Trust and the State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees (collectively the "Qualified Plans").

As part of its corporate structure, Auto Company has established an Investment Department. The Investment Department is directly or indirectly responsible for managing or overseeing the management of the investment and reinvestment of assets owned by each person that has joined in filing this Schedule 13G. Moreover, the Investment Department is responsible for voting proxies or overseeing the voting of proxies related to issuers the shares of which are held by one or more entities that have joined in filing this report. Each insurance company included in this report and SFIMC have established an Investment Committee that oversees the activities of the Investment Department in managing the firm's assets. The Trustees of the Qualified Plans perform a similar role in overseeing the investment of each plan's assets.

Pursuant to Rule 13d-4 each person listed in the table below expressly disclaims "beneficial ownership" as to all shares as to which such person has no right to receive the proceeds of sale of the security and disclaims that it is part of a "group".

Schedule 13G Page ____ of ___ Pages ____ 10 ___ 10

ny IC	8,283,428 shares
IC	5,925 shares
IC	3,466 shares
IA	4,164 shares
IV	0 shares
IV	0 shares
IV	0 shares
EP	3,586 shares
EP	
	0 shares
	0 shares
IV	0 shares
	IC IC IA IV IV IV EP

8,300,569 shares