

HELMERICH & PAYNE, INC.

Reported by **FEARS DOUGLAS E**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 12/04/03 for the Period Ending 12/03/03

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.	2. Issuer Name and Ticker or Trading Symbol							bol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
FEARS DO	UGLAS	E		H	Œ	LMERIC	СН &	E	PAYN	IE I	NC [HP]	(Cneck all ap)	piicable)			
	(Last) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)								Director Officer (Director 10% Owner X Officer (give title below) Other (specify below)			
1579 E. 21ST ST.					12/3/2003								"	Vice President & CFO			
(Street)				4.	4. If Amendment, Date Original Filed (MM/DD/YYYY)						DD/YYYY	6. Individual or Joint/Group Filing (Check Applicable Line)					
TULSA, OK 74114 (City) (State) (Zip)												X Form filed by	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
	, (- Non-De	eriv	ative Secu	ırities A	Ac	cquired	l, Di	sposed	of, or Be	eneficially Own	ed			
1.Title of Security (Instr. 3)			Trans. Date	Date 2A. Deemed Execution Date, if any 3. Trans. C (Instr. 8)				or Disposed of (D) Fo			5. Amount of Securit Following Reported (Instr. 3 and 4)	nstr. 3 and 4) For			7. Nature of Indirect Beneficial Ownership		
							Code		V	Amoui	(A) o						(Instr. 4)
	Tal	ble II - De	rivative S	ecurities	Be	eneficially	Owned	d ((e.g. , p	puts,	calls, v	varrants	, options, conve	rtible sec	urities)		
Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Deemed Execution Date, if any	Code	5. Number of Derivative Securit Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Securities (A) or (D)	eurities Expirat or O)		tion Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			9. Number of derivative Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
4	Security			Code	V	(A)	(D		Date Exercisa		xpiration ate	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Common Stock (right to buy)	\$24.1600	12/3/2003		A		30000.000	00		12/3/200)4 1	2/3/2013	Common	30000.0000	\$0	30000.0000	D	

Explanation of Responses:

(1) These options were granted under the Helmerich & Payne, Inc. 2000 Stock Incentive Plan on 12/03/03. These options vest over 4 years in 25% increments. The noted date represents the first date options vest and become exercisable.

Reporting Owners

Penarting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
FEARS DOUGLAS E								
1579 E. 21ST ST.			Vice President & CFO					
TULSA, OK 74114								

Signatures

/s/ Jonathan M. Cinocca, by Power of Attorney	12/4/2003
**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 control number.