STATE FARM MUTUAL AUTOMOBILE INSURANCE CO

Form SC 13G/A February 03, 2004

Schedule	13G/A
00110000	-00,11

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

SCHEDULE 13G

Under the Securities Exchange Act of 1934

(Amendment No. _____) *

19

	HELMERICH &	PAYNE, INC.
	(Name of	Issuer)
	COMMON	SHARES
	(Title of Class	of Securities)
	4234	52101
	(Cusip 1 12/31	•
 (Date	of Event Which Require	es 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).

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CUSIP No	423452101					
	Reporting Person and I.R.S. Identificarm Mutual Automobile Insurance Company			0		
2. Check the (a) (b)X		- oup				
3. SEC USE (YLMC:	-				
4. Citizensh	nip or Place of Organization: Illinois	-				
Number of Shares	5. Sole Voting Power: 4,128,600	-				
	6. Shared Voting Power: 0					
Each Reporting	7. Sole Dispositive Power: 4,128,600)				
	8. Shared Dispositive Power: 19,900					
9. Aggregate	e Amount Beneficially Owned by each Re	- porti -	ng Pe	rson	: 4,1	.48,500
10. Check Box	x if the Aggregate Amount in Row 9 exc	cludes	Cert	ain :	Share	es:
11. Percent o	of Class Represented by Amount in Row	9: 8.	27 %			
12. Type of I	Reporting Person: IC	=				
Schedule 13G		Page .	3	of <u>.</u>	6	_ Pages
Item 1(a) and	(b). Name and Address of Issuer & Pr	rincip	al Ex	ecut	ive C)ffices:
	HELMERICH & PAYNE, INC. UTICA AT TWENTY-FIRST ST. TULSA, OK 74114					
Item 2(a). Na	ame of Person Filing: State Farm Mutua	al Aut	omobi	le I	nsura	ince
_	Company and rela and Exhibit A	ited e	ntiti	es;	See	Item 8
Item 2(b). Ad	ddress of Principal Business Office: C	ne St	ate F	arm l	Plaza	L
		Bloomi	ngton	, IL	6171	. 0
Item 2(c). C:	itizenship: United States					
Item 2(d) and	(e). Title of Class of Securities ar	nd Cus	ip Nu	mber	: See	above.

Item	3.	Th	is Schedule is being :	filed, in accordance with 240.13d-1(b).
		Se	e Exhibit A attached.	
Item	4 (a)		Amount Beneficially (Owned: 4,148,500 shares
Item	4 (b)		Percent of Class: 8.2	27 percent pursuant to Rule 13d-3(d)(1).
Item	4(c)		Number of shares as t	to which such person has:
			(ii) Shared power to (iii) Sole Power to d	e or to direct the vote: 4,128,600 vote or to direct the vote: 0 ispose or to direct disposition of: 4,128,600 dispose or to direct disposition of: 19,900
Item	5.	Ow	nership of Five Perce	nt or less of a Class: Not Applicable.
Item	6.	Ow	nership of More than I	Five Percent on Behalf of Another Person: N/A
Item	7.	Id	entification and Class	sification of the Subsidiary Which Acquired
		th —	e Security being Repor	rted on by the Parent Holding Company: N/A
Item	8.	Id	entification and Class	sification of Members of the Group:
		Se	e Exhibit A attached.	
Item	9.	No	tice of Dissolution o	f Group: N/A
Sche	edule	 e 1	3G	Page of Pages 6
of acc acc cha	my k quire quire angir re no	kno ed ed ng ot	wledge and belief, the and are held in the or and are not held for t or influencing the cor	igning below I certify that, to the best e securities referred to above were rdinary course of business and were not the purpose of or with the effect of antrol of the issuer of the securities and neld in connection with or as a participant purpose or effect.
				Signature
I	certi	Lfy		o the best of my knowledge and belief, set forth in this statement is true,
			01/21/2004	STATE FARM MUTUAL AUTOMOBILE
			Date	 INSURANCE COMPANY

STATE FARM LIFE INSURANCE COMPANY

STATE FARM FIRE AND CASUALTY COMPANY

STATE FARM INSURANCE COMPANIES EMPLOYEE RETIREMENT TRUST

STATE FARM INVESTMENT MANAGEMENT CORP.

STATE FARM INSURANCE COMPANIES STATE FARM ASSOCIATES' FUNDS SAVINGS AND THRIFT PLAN FOR U.S. EMPLOYEES

TRUST - STATE FARM GROWTH FUND

STATE FARM ASSOCIATES' FUNDS TRUST - STATE FARM BALANCED FUND

STATE FARM MUTUAL FUND TRUST

STATE FARM VARIABLE PRODUCT TRUST

/s/ Paul N. Eckley

Paul N. Eckley, Fiduciary of each of the above

Paul N. Eckley, Vice President of each of the above

Schedule 13G

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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, State Farm Life and Accident Assurance 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 adviser under the Investment Advisers Act of 1940. SFIMC serves as transfer agent and investment adviser to State 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
Name	Classification Under Item 3		based eeds
State Farm Mutual Automobile Insurance Compar	ny IC	4,148,500	shares
State Farm Life Insurance Company	IC	0	shares
State Farm Life and Accident Assurance Compar	ny IC	0	shares
State Farm Fire and Casualty Company	IC	0	shares
State Farm Investment Management Corp.	IA	0	shares
State Farm Associates' Funds Trust - State			
Farm Growth Fund	IV	0	shares
State Farm Associates' Funds Trust - State			
Farm Balanced Fund	IV	0	shares
State Farm Variable Product Trust	IV	0	shares
State Farm Insurance Companies Employee			
Retirement Trust	EP	0	shares
State Farm Insurance Companies Savings and			
Thrift Plan for U.S. Employees	EP		
Equities Account		-	shares
Balanced Account			shares
State Farm Mutual Fund Trust	IV	0	shares
		4,148,500	shares