FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APP	OMB APPROVAL						
OMB Number:	3235-0104						
Estimated average burden							
hours per response:	0.5						

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(b) of the Investment Company Act of 1940

of Section 30(ii) of the investment Company Act of 1940												
1. Name and Address of Reporting Person* EDWARDS JOHNNY 2. Date of Event Requiring Statemen (Month/Day/Year) 03/08/2010				nent	3. Issuer Name and Ticker or Trading Symbol HELIX ENERGY SOLUTIONS GROUP INC [HLX]							
(Last) (First) (Middle) 400 NORTH SAM HOUSTON PARKWAY EAST SUITE 400					(Check	ationship of Reporting Perso c all applicable) Director	10% Owner Other (specify below)		5. If Amendment, Date of Original Filed (Month/Day/Year)			
					X	Officer (give title below) EVP - Oil & C			6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person			
(Street) HOUSTON	TX	77060									y More than One	
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4) 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		ct (D)	4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock						68,702	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
Expira			Expiration Da	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Secur Underlying Derivative Secur		4. Conversion or Exercise Price of		5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
		Date Exercisable	Expiratio Date	n Title	•	Amount or Number of Shares	Derivat Securit	ive	or Indirect (I) (Instr. 5)			

Explanation of Responses:

Remarks:

<u>/s/ Johnny Edwards</u> <u>03/08/2010</u>

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $Note: File \ three \ copies \ of \ this \ Form, \ one \ of \ which \ must \ be \ manually \ signed. \ If \ space \ is \ insufficient, \ see \ Instruction \ 6 \ for \ procedure.$

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 Number.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (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).