FORM 4

600 TRAVIS STE 6600

(Street)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| k this box if no longer subject to |
|------------------------------------|
| on 16. Form 4 or Form 5 |
| ations may continue. See |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

7. Nature

of Indirect Beneficial Ownership

By SCF-

IV, L.P.(2)

11. Nature

of Indirect

Beneficial

Ownership (Instr. 4)

| Section obligat | this box if no lo n 16. Form 4 or tions may contir tion 1(b). | Form 5 | STA | | ed pursua | ınt to S | Section | n 16(a) |) of the S | ecurit | NEFICI ties Exchan mpany Act | ge Act | of 1934 | | IIP | Estim | Number: ated average bur per response: | 3235-028 den 0 |
|---|--|--|------------------------|----------|--|------------------|---------|---------|----------------------------------|---------|------------------------------------|---|---|---|---|---|---|---|
| 1. Name and Address of Reporting Person* SIMMONS L E | | | | HOI | 2. Issuer Name and Ticker or Trading Symbol HORNBECK OFFSHORE SERVICES INC /LA [HOS] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title X Other (specify below) Member of Group | | | | |
| (Last) (First) (Middle) 600 TRAVIS STE 6600 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/01/2005 | | | | | | | | | | | | | |
| (Street) | ON T | X : | 77002 | | 4. If A | mendr | ment, | Date o | of Origina | l Filed | d (Month/Da | ay/Year |) | 6. Indir Line) | Form | n filed by On n filed by Mo | p Filing (Check A e Reporting Per re than One Re | son |
| (City) | (St | | (Zip) | n-Deriv | vative S | Secu | ritie | s Ari | nuired | Dis | sposed c | of or l | | ficially | Owne | -d | | |
| 1. Title of | Security (Inst | | 101 110 | 2. Trans | | 2A. Exec | Deeme | ed | 3. Transa | ection | 4. Securit | ies Acq | uired (/ | A) or | 5. Amo Securi Benefi | ount of ities icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indired Beneficia Ownersh |
| | | | | | | | | Code | v | Amount | (A (D |) or) | Price | Transa | action(s) 3 and 4) | | (Instr. 4) | |
| Common Stock 09/01 | | | 1/2005 |)05 | | S ⁽¹⁾ | | 102,20 | 00 | D | \$36.02 | 3,6 | 516,008 | I | By SCI IV, L.P. | | | |
| | | Ta | | | | | | | | | osed of, onvertib | | | | wned | | | |
| Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execution Date, if any | | 4. Transacti Code (Ins 8) | str. | n of i | | 6. Date I Expiration (Month/I | on Dat | | Amou Secur Under Deriva Secur | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | rice of ivative curity ctr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Natur of Indire Benefici Ownersh (Instr. 4) |
| | | | | • | Code V | , | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amo or Num of Shar | ber | | | | |
| | nd Address of ONS L E | Reporting Person* | | | | | | | | | | | | | | | | |
| (Last) | AVIS STE 60 | (First) | (Mid | dle) | | - | | | | | | | | | | | | |
| (Street) | ON | TX | 770 | 02 | | | | | | | | | | | | | | |
| (City) | | (State) | (Zip) | | | | | | | | | | | | | | | |
| 1. Name ar | | Reporting Person* | | | | | | | | | | | | | | | | |
| (Last) | AVIS STE 60 | (First) | (Mid | dle) | | | | | | | | | | | | | | |
| (Street) | ON | TX | 770 | 02 | | - | | | | | | | | | | | | |
| (City) | | (State) | (Zip) | | | | | | | | | | | | | | | |
| | | Reporting Person* PARTNERS | | | | | | | | | | | | | | | | |
| (Last) | | (First) | (Mid | dle) | | | | | | | | | | | | | | |

| HOUSTON | TX | 77002 | | | | |
|---------|---------|-------|--|--|--|--|
| (City) | (State) | (Zip) | | | | |

Explanation of Responses:

- 1. Reflects sale of common stock of issuer held by SCF-IV, L.P.
- 2. The reporting person is sole stockholder and sole director of L.E. Simmons & Associates, Incorporated, a Delaware corporation (LESA), which is the sole general partner of SCF-IV GP Limited Partnership, a Delaware limited partnership (SCF-IV GP), SCF-IV 3i LP, a Delaware limited partnership (SCF-IV Management Partners LP, a Delaware limited partnership (SCF-IV MP). Additionally, SCF-IV GP is the sole general partner of SCF-IV LP, a Delaware limited partnership (SCF-IV). Based on the reporting person's affiliation with SCF-IV, SCF-IV GP, SCF-IV MP, and LESA (collectively the "Related Entities"), the reporting person may be deemed to beneficially owned by the Related Entities.

Demarks

L.E. Simmons is signing for himself, as the designated filer, as well as in his capacity as attorney-in-fact for LESA, SCF-IV GP, and SCF-IV.

<u>L.E. Simmons</u> 09/02/2005

** 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 Number.