FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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S IN DENECICIAL OWNEDSHID	OMB Number:	3235-0287					

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:		
OTAL EMERT OF OTTAROLO IN BEINE TOME OTTALKOTIII	Estimated average burden		
Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934	hours per response:		
r lied pursuant to Section 10(a) or the Securities Exchange Act of 1554			

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol HORNBECK OFFSHORE SERVICES INC										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
HORNBECK LARRY D					/LA[HOS]								-	X	Direc	ctor		10% O	wner		
														_		Office	er (give title		Other (below)	(specify	
(Last)	(Fi	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year)										beiov	w)		below)		
COUNTY ROAD 3195, PO BOX 590					07/.	07/17/2007															
(Street)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)						
LOVELA	DY T	ζ 7	75851		1										X	Form	n filed by One	e Rep	orting Pers	on	
(Cit.)	(64	ata) (	Zin)												Form filed by More than One Reporting Person						
(City)	(51	ate) (	Zip)																		
		Tabl	e I - Nor	n-Deriva	ative	Sec	uritie	s Ac	quired	, Dis	posed o	f, oı	r Bene	eficia	ally	Owne	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Da			Code (Instr.						4 and S		Securities Beneficially		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(1130.4)	
Common	Stock		07/17/2007 A 4,084 <sup>(1)</sup> A \$0 152,172 D					D													
		Та									sed of, onvertib				y Ov	vned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	I. Transaction Code (Instr. 3)				6. Date I Expirati (Month/I		Amount of				ivative country str. 5) E	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	F D O (I	LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or Nun of	nber							

## **Explanation of Responses:**

1. Represents a restricted stock unit award granted to the reporting person for service as a non-employee director of the Company, which will vest in full on 7/17/2008. This Longevity Grant is awarded pursuant to the Company's Non-Employee Director Compensation Policy.

(A) (D)

/s/ Paul M. Ordogne, as poa for 07/19/2007 Larry D. Hornbeck

\*\* 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.