FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB APPROVAL OMB Number: 3235-

OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

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

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*  KRABLIN STEVEN W						2. Issuer Name and Ticker or Trading Symbol HORNBECK OFFSHORE SERVICES INC													olicable)	.,	Person(s) to Issuer 10% Owner	
(Last) (First) (Middle) 103 NORTHPARK BOULEVARD, SUITE 300						/LA [ HOS ]  3. Date of Earliest Transaction (Month/Day/Year) 08/01/2008												Officer (give title below)		Othe belov	(specify v)	
(Street) COVINGTON LA 70433 (City) (State) (Zip)						4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										Indivine)	ividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
			Tabl	e I - Non	-Deriv	ative	Se	curiti	es Ac	quir	red, [	Disp	osed o	f, or	Bene	eficia	ally (	Owne	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		,   T	Transaction Disposed Code (Instr. 5)			rities Acquired (A) ed Of (D) (Instr. 3,			4 and Sec Ber Owi		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
											Code	v	Amount		(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
COMMON STOCK 08/01/							3				A		2,125	i <sup>(1)</sup> A		\$	50 11,1		.1,125	D		
			Та	ble II - D									sed of, onvertib				y Ov	vned				
L. Title of Derivative Security (Instr. 3)	2. Conversi or Exerci Price of Derivativ Security	on [	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date,	4. Fransactior Code (Instr. 3)				Expi	oiration onth/Day	Date y/Yea		7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)  Amotor Numi					9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## 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 8/01/2009. This Longevity Grant is awarded pursuant to the Company's Non-Employee Director Compensation Policy.

/s/ Paul M. Ordogne, as poa for Steven W. Krablin 08/04/2008

\*\* 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.