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### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

FORM 4

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

1. Name and Address of Reporting Person*       2. Issuer Name and Ticker or Trading Symbol       5. Relationship of Reporting Person(s) to Issuer         STEWART BERNIE W       (Middle)       1.4 [ HOS ]       1.4 [ HOS ]       1.4 [ HOS ]         (Last)       (First)       (Middle)       3. Date of Earliest Transaction (Month/Day/Year)       Officer (give title Other (specify below)       Other (specify below)         (Street)       (Street)       (State)       Zip)       4. If Amendment, Date of Original Filed (Month/Day/Year)       6. Individual or Joint/Group Filing (Check Applicable)         X       Form filed by One Reporting Person       Form filed by More than One Reporting Person         (City)       (State)       (Zip)       (Zip)       Person			
(Last)       (First)       (Middle)         103 NORTHPARK BOULEVARD, SUITE 300       3. Date of Earliest Transaction (Month/Day/Year)       below)       below)         (Street)       07/17/2007       4. If Amendment, Date of Original Filed (Month/Day/Year)       6. Individual or Joint/Group Filing (Check Applicable Line)         COVINGTON       LA       70433       X       Form filed by One Reporting Person	1 0	HORNBECK OFFSHORE SERVICES INC	(Check all applicable) X Director 10% Owner
(Street) COVINGTON LA 70433 K Form filed by One Reporting Person Form filed by More than One Reporting Person			
	COVINGTON LA 70433	4. If Amendment, Date of Original Filed (Month/Day/Year)	Line) X Form filed by One Reporting Person Form filed by More than One Reporting

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr.		4. Securities / Disposed Of ( 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(11511 4)
COMMON STOCK	07/17/2007		A		<b>4,08</b> 4 <sup>(1)</sup>	Α	\$ <mark>0</mark>	9,584	D	

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of		6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

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.

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

Bernie W. Stewart

\*\* 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.