FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF	CHANGES	IN F	RENEFICIAL	OWNERSHIP
SIAILMENI	OI.	CHANGES	IIN L	CIALI ICIAL	CAMINE VOLUME

OMB APPROVAL 3235-0287 OMB Number: 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* SWYKA NICHOLAS LEW JR (Last) (First) (Middle) 103 NORTHPARK BLVD, SUITE 300 (Street) COVINGTON LA 70433 (City) (State) (Zip)					3. D 02/	2. Issuer Name and Ticker or Trading Symbol HORNBECK OFFSHORE SERVICES INC /LA [HOS] 3. Date of Earliest Transaction (Month/Day/Year) 02/13/2015 4. If Amendment, Date of Original Filed (Month/Day/Year)									S. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title Other (specify below) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day				ction	ion 2A. Deemed Execution Date,			3. Transa Code (8)	ction				or and	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
COMMON STOCK 02/1 COMMON STOCK				02/13/	2015	015		A		1,793(1)	A	\$0	0.00	9,994 7,420 ⁽²⁾			I	held by Family Limited Partnership		
		med on Date,	uts, c 4. Transa	ts, calls, warrants, 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Date Exercisable Expiration Date Exercisable Date Exercisable					8) 8.D S (I	Price of curity ive str. 5) Price of derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)		e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	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 vested in full on the Grant Date. This Longevity Grant is awarded pursuant to the Company's Non-Employee Director Compensation Policy.
- 2. Represents shares beneficially owned by Reporting Person through a Family Limited Partnership over which the Reporting Person has voting power

Remarks:

/s/ Beth A. LaBrosse as POA 02/18/2015 for Nicholas L. Swyka

** 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.