FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## HIP

STATEMENT	OF	CHANGES	IN I	BENEFICIA	۱L	OWNERSH

OMB APPROVAL 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* Stone Carolyn J						2. Issuer Name and Ticker or Trading Symbol  Civeo Corp [ CVEO ]								(Che	ck all appointed	olicable)	g Person(s) to Issuer  10% Owner  Other (specify	
(Last) (First) (Middle) 333 CLAY STREET, SUITE 4980					3. Date of Earliest Transaction (Month/Day/Year) 05/30/2016								7	belo	w) ``	belo emarks		
(Street) HOUSTO			77002 Zip)		Amer	Amendment, Date of Original Filed (Month/Day/Year)							6. In Line	) 【 Forn Forn	I or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson			
		Tabl	e I - Non	-Deriva	ative	Sec	uritie	s Ac	quired,	Dis	posed o	f, or E	3ene	ficiall	y Own	ed		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution Date,		Code (Instr.   5)					Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect				
								Code	v	Amount	(A (D	) or )	Price	Transa	action(s) 3 and 4)		(mount)	
Common Shares 05/			05/30	/2016		F		1,112	2	D	\$2	5	3,825	D				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any		3A. Deemed Execution I if any (Month/Day	Date,	Code (Instr.		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		tr. 3	Price of erivative ecurity 1str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amor or Numl of Share	ber				

**Explanation of Responses:** 

## Remarks:

Vice President, Controller and Corporate Secretary

/s/ Carolyn J. Stone, by Bradley J. Dodson, as Attorney-in-Fact

06/01/2016

\*\* 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.