FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	

STATEMENT	OF	CHANGE

S IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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 Eychange Act of 1934

											ompany Act		. 200 .						
Name and Address of Reporting Person* Torgerson Lance				2. Issuer Name and Ticker or Trading Symbol Civeo Corp [CVEO]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner								
(1 act) (First) (Middle) I					04/09	3. Date of Earliest Transaction (Month/Day/Year) 04/09/2021								below			belov		
(Street)	TON A	Γ 0.	[°] 6E 5Z8		4. If A	mendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person							
(City)	(5	State) (2	Zip)																
		Table	I - Non-D	erivat	tive S	ecu	rities	Ac	quire	d, Di	sposed o	f, or B	enef	iciall	y Own	ed			
1. Title of Security (Instr. 3) 2. Trans Date (Month/III)			ear) E	2A. Deemed Execution Date, if any (Month/Day/Year)		·	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Transac	eported ransaction(s) nstr. 3 and 4)			(Instr. 4)
Common	Stock	Stock		04/09/2021					S ⁽¹⁾		2,002	D	\$16.	.22(1)	1,66	67,806		I	Torgerson Family Trust ⁽²⁾
Common Stock			04/	09/202	021				S ⁽¹⁾		68	D	\$16.	.22 ⁽¹⁾	482	2,380		I	989677 Alberta Ltd
		Tal									posed of, convertib				Owned	k			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution D	3A. Deemed Execution Date,		5. Numbord of Derivative Securitie Acquirer (A) or Disposer of (D) (Instr. 3, and 5)		mber ative rities ired osed	f 6. Date Exe Expiration (Month/Day		rcisable and Date	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Numbe derivative Securities Beneficia Owned Following Reported Transactic (Instr. 4)	e S Illy	10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amou or Numb of Share	er	er				
	nd Address Son Land	of Reporting Person [*]																	
(Last) 9645 45	AVENUE	(First) NW	(Middle)																
(Street)	TON	A0	T6E 52	Z8															
(City)		(State)	(Zip)																
	nd Address son Tam	of Reporting Person* my																	
(Last)	AVENITE	(First)	(Middle)																

Explanation of Responses:

A0

(State)

(Zip)

T6E 5Z8

Remarks:

(Street) **EDMONTON**

(City)

^{1.} The shares were sold in multiple trades pursuant to a 10b5-1 plan at prices ranging from \$16.01 to \$16.60. The price reported above reflects the weighted average sales price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

^{2.} Each of the reporting persons serves as a co-trustee of the trust and is a current or future beneficiary thereof.

 /s/ Lance Torgerson
 04/13/2021

 /s/ Tammy Torgerson
 04/13/2021

 ** 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).
- $^{\star\star} \ \text{Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C.\ 1001\ \text{and}\ 15\ \text{U.S.C.}\ 78 \text{ff(a)}.$

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.