FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average h | nurden | | | | | | | | |

0.5

hours per response:

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* Newman Steven L | | | | | 2. Issuer Name and Ticker or Trading Symbol DRIL-QUIP INC [DRQ] | | | | | | | | | Relationsh heck all ap | , | | | | |
|--|--|--|---|-------|---|---|--|--------|---------------------|--|-------------------|--|---|---------------------------|---|---|---|--|--|
| (Last) (First) (Middle) 6401 NORTH ELDRIDGE PARKWAY | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/01/2019 | | | | | | | | | Offic belo | cer (give title ow) | Other (specify below) | | |
| (Street) HOUSTON TX 77041 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | ne) X For For | dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 8 4. Securities Acquired (/Disposed Of (D) (Instr. 3) | | | | nd Secur Bene | ficially ed Following | 6. Owne Form: D (D) or In (I) (Instr | irect direct | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | | Code | v | Amount (A) or (D) | | Price | Trans | action(s) . 3 and 4) | | | (111511.4) | |
| Common Stock 07/03 | | | | /2019 | | A | | 491(1) | | A | \$0.0 | 00 | 17,149 | |) | | | | |
| | 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) | Execution Date, if any (Month/Day/Year) | | 4. Transa Code (8) | | Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiration (Month/D | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount or Numbe of Title Shares | | ount nber | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owr Forr Dire or In (I) (II | nership n: ct (D) ddirect nstr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

1. This restricted stock award was granted pursuant to the Company's 2017 Omnibus Incentive Plan and therefore has no purchase or sales price. This restricted stock award was received in lieu of all or a portion of the quarterly fees related to the reporting person's service on the Board of Directors and its committees.

Remarks:

/s/ James C. Webster, Attorneyin-Fact 07/02/2019

** 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.