FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Vashington,	D.C. 20549
-------------	------------

## STATEMENT OF CHANGES 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 Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Hooper Charles W				<u>A</u>	Issuer Name and Ticker or Trading Symbol     APA Corp [ APA ]      Date of Earliest Transaction (Month/Day/Year)						ck all applica Director	able)	Person(s) to Iss 10% O Other (	wner		
(Last)	(F	irst)	(Middle)		09/30/2023						below)	give uue	below)	эреспу		
2000 POST OAK BLVD				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Inc	6. Individual or Joint/Group Filing (Check Applicable					
SUITE 100			_						- 1 ′	X Form filed by One Reporting Person						
(Street)												Form fil Person	ed by More	than One Repo	rting	
HOUST	ON T	X	77056		Rule 10b5-1(c) Transaction Indication							1				
(City) (State) (Zip)		_   _	_													
			١L	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												
		Ta	ble I - Non-De	rivativ	ve Se	curiti	es Ac	quired, Dis	posed of	, or Ben	eficially	/ Owned				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				Execution Date,		3. Transaction Code (Instr.	Disposed	es Acquired Of (D) (Instr		5. Amoun Securities Beneficia Owned Fo	s F lly (i	. Ownership form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
						Code V	Amount	(A) or (D)	(A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)		Instr. 4)			
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)		Derivative I		6. Date Exercisable and Expiration Date (Month/Day/Year)		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)	Ownershi 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		(Instr. 4)	i(s)		
Phantom Stock Units	\$0 <sup>(1)</sup>	09/30/2023		М		1,216		(2)	(2)	Common Stock	1,216	\$0	8,960	D		
Restricted Stock / Units	\$0 <sup>(3)</sup>	09/30/2023		A		1,216		09/30/2023 <sup>(4)</sup>	(4)	Common Stock	1,216	\$0	1,216	D		
Restricted Stock / Units	\$0 <sup>(3)</sup>	09/30/2023		М			1,216	09/30/2023 <sup>(5)</sup>	(5)	Common Stock	1,216	\$0	0	D		

## **Explanation of Responses:**

- 1. One share of APA common stock for each phantom stock unit.
- $2. \ Exempt \ acquisition \ pursuant \ to \ Rule \ 16b-3(d) accrued \ under the \ deferred \ compensation \ provisions \ of \ APA's \ Outside \ Directors \ Deferral \ Program.$
- 3. One share of APA common stock for each restricted stock unit.
- 4. Restricted stock units granted to each of APA's non-employee directors under the 2016 Omnibus Compensation Plan which plan was approved by shareholders in May 2016.
- 5. Vesting of restricted stock units granted to each of APA's non-employee directors under the 2016 Omnibus Compensation Plan.

## Remarks:

10/02/2023 Raj Sharma, Attorney-in-Fact

\*\* 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.