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 burden										
ı	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*  Ragauss Peter A  (Last) (First) (Middle)  2000 W SAM HOUSTON PARKWAY S  SUITE 200  (Street)					2. Issuer Name and Ticker or Trading Symbol <u>APA Corp</u> [ APA ]      3. Date of Earliest Transaction (Month/Day/Year)     06/30/2024  4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Inc	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)    Image: Director				
HOUSTON TX 77042  (City) (State) (Zip)				_ R	Rule 10b5-1(c) Transaction Indication  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.										
		Tal	ble I - Non-De	rivati	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,		Code (Instr.	Disposed (	es Acquired Of (D) (Instr		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V			Amount	(A) or (D)	Price	Transacti (Instr. 3 a			(1130.4)		
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		ransaction Derivative Securities		tive ties red (A) posed (Instr.	6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  5. Curities Underlyin Derivative (Instr. 3 a		f g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Owners Form: Direct (I or Indirect)	Beneficial Ownership ect (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction (Instr. 4)	1(5)	
Phantom Stock Units	\$0 <sup>(1)</sup>	06/30/2024		M		1,698		(2)	(2)	Common Stock	1,698	\$0	78,364	D	
Restricted Stock / Units	\$0 <sup>(3)</sup>	06/30/2024		A		1,698		06/30/2024 <sup>(4)</sup>	(4)	Common Stock	1,698	\$0	1,698	D	
Restricted Stock / Units	\$0 <sup>(3)</sup>	06/30/2024		M			1,698	06/30/2024 <sup>(5)</sup>	(5)	Common Stock	1,698	\$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:

07/02/2024 Raj Sharma, Attorney-in-Fact

\*\* Signature of Reporting Person

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.