FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	D C	20E40
Vashington,	D.C.	20549

STATEMENT	OF (CHANGES	IN BEI	NEFICIAL	OWNERS	HIP

OMB APPROVAL										
OMB Number: 3235-										
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* Ragauss Peter A				A	2. Issuer Name and Ticker or Trading Symbol APA Corp [APA] 3. Date of Earliest Transaction (Month/Day/Year)						ck all applica Director	able)	Person(s) to Iss			
(Last)	(F	irst)	(Middle)		09/30/2023						below)	give uue	below)			
2000 POST OAK BLVD.				4.	If Ame	endment	, Date o	f Original Filed	(Month/Day	/Year)		6. Individual or Joint/Group Filing (Check Applicable				
SUITE 100										- 1 ′	Line) X Form filed by One Reporting Person					
(Street)				_								Form fil Person	ed by More	than One Repo	rting	
HOUST	ON T	X	77056	F	l =	40-5	1(-)	T	in a landia	4!		Feison				
(6)				- R	Rule 10b5-1(c) Transaction Indication											
(City)	(City) (State) (Zip)				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.											
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially 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	Form ly (D) or	6. Ownership Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
								Code V	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a			(Instr. 4)	
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 Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		n Derivative I		6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)		f G Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)			
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	1(5)		
Phantom Stock Units	\$0 ⁽¹⁾	09/30/2023		М		1,216		(2)	(2)	Common Stock	1,216	\$0	72,083	D		
Restricted Stock / Units	\$0 ⁽³⁾	09/30/2023		A		1,216		09/30/2023 ⁽⁴⁾	(4)	Common Stock	1,216	\$0	1,216	D		
Restricted Stock / Units	\$0 ⁽³⁾	09/30/2023		М			1,216	09/30/2023 ⁽⁵⁾	(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.