SEC For	m 4																	
	UNITE	NITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549																
			Washington, D.C. 20549								OMB			APPRO	VAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).					led pu	irsuan	t to Sec	tion 16(	a) of the S	ecuri	-	HIP	OMB Number: 3235-0 Estimated average burden hours per response:			3235-0287 1 0.5		
transac contrac the pur securiti to satis	chase or sale or es of the issue fy the affirmativ ons of Rule 10b	pursuant to a written plan for of equity r that is intended ve defense			Ū		001 30(1		invesurie			51 1340						
1. Name and Address of Reporting Person <sup>*</sup> Ragauss Peter A						2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>APA Corp</u> [ APA ]								elationship o eck all applica Director	able)	g Perso	10% Ow	
(Last) (First) (Middle) 2000 W SAM HOUSTON PARKWAY S						3. Date of Earliest Transaction (Month/Day/Year) 09/30/2024										give title Other (speci below)		
SUITE 200 (Street) HOUSTON TX 77042					4.1	Line)										Group Filing (Check Applicable y One Reporting Person y More than One Reporting		
(City)	(S	tate)	(Zip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) Date (Month)					ear)	2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr.		Disposed	es Acquiree Of (D) (Insti		5. Amoun Securities Beneficia Owned Fo Reported	s Forr Illy (D) o ollowing (I) (I		Direct I Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)	Price	Transacti (Instr. 3 a	ion(s)			iiisti. 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)	Execution Date,		4. Transaction Code (Instr. 8)		5. Num Deriva Securi Acquir or Dis of (D) 3, 4 an	ties red (A) posed (Instr.	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 derivative Securitie Beneficia Owned Following Reported Transacti	e s ally g	10. Ownership 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)			
Phantom Stock Units	\$0 <sup>(1)</sup>	09/30/2024			М		2,044		(2)		(2)	Common Stock	2,044	\$0	81,10	)9	D	
Restricted Stock / Units	\$0 <sup>(3)</sup>	09/30/2024			Α		2,044		09/30/2024 <sup>(4)</sup>		(4)	Common Stock	2,044	\$0	2,04	4	D	
Restricted Stock / Units	\$0 <sup>(3)</sup>	09/30/2024			М			2,044	09/30/202	24 <sup>(5)</sup>	(5)	Common Stock	2,044	\$0	0		D	
Explanation	n of Respons	Ses.																

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:

Raj Sharma, Attorney-in-Fact 10/01/2024 \*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\ast}$  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.