FORM 4

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

Vashington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number:	3235-0287										
Estimated average burden											
hours por rosponso:	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*  LOWE JOHN E					2. Issuer Name <b>and</b> Ticker or Trading Symbol APA Corp [ APA ]								elationship o eck all applica Director	10% Own		ner		
(Last) (First) (Middle) 2000 POST OAK BLVD. SUITE 100					12/3	3. Date of Earliest Transaction (Month/Day/Year) 12/31/2021								below)	•		below)	
(Street) HOUST(			77056 (Zip)		4. If a	Ame	ndment,	, Date o	of Original File	ed (N	Month/Day	/Year)	Line	Y Form fil	ed by One	Repoi	(Check App rting Person One Report	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)  2. Transa Date (Month/D			ction	ction 2A. Deemed Execution Date		3. 4. Secur Transaction Dispose Code (Instr. 5)		4. Securitie	ities Acquired (A) od Of (D) (Instr. 3, 4		5. Amoun Securities Beneficia Owned Fo	s lly ollowing			7. Nature of Indirect Beneficial Ownership			
								Code V		Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	on(s)			(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 Day if any (Month/Day/	Co	ansact ode (In:		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative (Instr. 3 and	J Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	Owi Fori Dire or Ii (I) (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Co	ode V	,	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	on(s)		
Phantom Stock Units	\$0.0 <sup>(1)</sup>	12/31/2021		1	M		2,788		(2)		(2)	Common Stock	2,788	\$0	92,280	0	D	
Restricted Stock / Units	\$0.0 <sup>(3)</sup>	12/31/2021			A		2,788		12/31/2021 <sup>(4)</sup>		(4)	Common Stock	2,788	\$0	2,788		D	
Restricted Stock / Units	\$0.0 <sup>(3)</sup>	12/31/2021		1	M			2,788	12/31/2021 <sup>(5)</sup>		(5)	Common Stock	2,788	\$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:

01/03/2022 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.