FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per respons	e: 0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*     Bryant Deric D.					2. Issuer Name and Ticker or Trading Symbol ChampionX Corp [ CHX ]										all app Direc	olicable) etor	ing Person(s) to		Owner
(Last)	(Fii	st) (M	Middle ECH	,	3. Date of Earliest Transaction (Month/Day/Year) 08/01/2023								X	Officer (give title below)  See rep			Other (s below)	specify	
FOREST BLVD, BLDG 4, 12TH FLOOR				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) THE WOODI	· · ·				Rule 10b5-1(c) Transaction Indication								on	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (Z	Zip)	-	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									olan that is in	tended				
		Table	I - N	lon-Deriva	tive S	ecui	rities	Ac	quire	d, Di	sposed o	f, or E	Benefic	cially	<b>Owr</b>	ned			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				ear)   Execution		on Date, /Day/Year)		3. Transaction Code (Instr. 8)  4. Securitie Disposed (		4. Securities Disposed Of	s Acquired (A) of (D) (Instr. 3, 4		nd 5)	Secur Benef Owner Follow	5. Amount of Securities Beneficially Owned Following		m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)					
Common Stock 08/01/202					23				S		18,771 <sup>(1)</sup>	D	\$35.3	3949 3		36,163		D	
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)	erivative   Conversion   Date   Execution Date, ecurity   or Exercise   (Month/Day/Year)   if any				ransaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		te Exe ation I th/Day		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4		Deri Sec (Ins	Price of Privative Ecurity Istr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V (A) (D)		(D)	Date Expir Exercisable Date		Expiration Date	Title	of Shares							

## Explanation of Responses:

1. These sales were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on February 24, 2023. The shares were sold in multiple trades at prices ranging from \$35.15 to \$35.56, inclusive. The Reporting Person undertakes to provide, upon request, to the Securities and Exchange Commission staff, the Issuer or a security holder, full information regarding the number of shares and prices at which the transactions were effected.

## Remarks:

Chief Operating Officer and President, Chemical Technologies

/s/ Julia Wright, as attorneyin-fact 08/01/2023

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.