FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287		
OTATEMENT OF STIANGES IN BENEFICIAL SWITCHSIM	Estimated average burden			

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

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

Name and Address of Reporting Person* O'Dell William Jr.				2. Issuer Name and Ticker or Trading Symbol ChampionX Corp [CHX]								(Che	ck all app Direct	licable)		rson(s) to Is 10% Ov Other (s	vner			
(Last)	(Fir	st) (M	Middle)	DLOGY	3. Date of Earliest Transaction (Month/Day/Year) 03/28/2024								X	below			below)	вреспу		
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	LANDS TX 77381													X	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)		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.								ended to							
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or E	Benef	ficiall	y Own	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Execution D		Date,	Code (Instr.					, 4 and Secur Benef Owne		ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) (D)		Price		action(s) 3 and 4)			(Instr. 4)		
Common	Stock			03/28/2	2024		S		27,178 ⁽¹⁾ D)	\$36	57,748			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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	r) if any	emed ion Date, /Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Yea		te	7. Title and Amount of Securities Underlying Derivative Security (In 3 and 4)		De Se (II	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly Ov Fo Dii or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Expiration Date	Title	Amou or Numb of Share	ber														

Explanation of Responses:

1. These sales were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on August 10, 2023. The shares were sold in multiple trades, each at \$36.00 per share. 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. No further shares remain for sale under this trading plan.

Remarks:

President, Oilfield and Specialty Performance

/s/ Julia Wright, as attorneyin-fact

03/28/2024

** 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.