### Edgar Filing: APACHE CORP - Form 4

APACHE CORP Form 4 August 27, 2015 <b>FORM 4</b> Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Check this pox	NERSHIP OF NERSHIP OF A Constraint of 1934, f 1935 or Section Number: 3235-0287 Number: January 31, 2005 Estimated average burden hours per response 0.5	
(Print or Type Responses)		
1. Name and Address of Reporting Person CHRISTMANN JOHN J	2. Issuer Name <b>and</b> Ticker or Trading Symbol APACHE CORP [APA]	5. Relationship of Reporting Person(s) to Issuer
(Last) (First) (Middle)	3. Date of Earliest Transaction	(Check all applicable)
2000 POST OAK BLVD., SUITE 100	(Month/Day/Year) 08/26/2015	_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) CEO and President
(Street) HOUSTON, TX 77056-4400	4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting
(City) (State) (Zip)	Table I. Non Derivative Securities Ac	Person Juired, Disposed of, or Beneficially Owned
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. D Execu any		5. Amount of Securities6.7. Nature of IndirectBeneficiallyForm: DirectBeneficial OwnershipOwned(D) orOwnershipFollowingIndirect (I)(Instr. 4)Reported(Instr. 4)Transaction(s) (Instr. 3 and 4)(Instr. 4)
Common 08/26/2015 Stock	I 8,335 A <sup>\$</sup> 39.299	Held by 17,881.999 I Trustee of NQ Plan
Common Stock		24,874.34 D
Common Stock		1,359.122 I By Trust
Common Stock		2,813.691 I Held by Trustee of 401(k) Plan

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

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# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amoun	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
								1	Amount		
						Date	Expiration		or		
						Exercisable	•	Title Number			
									of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
CHRISTMANN JOHN J 2000 POST OAK BLVD. SUITE 100 HOUSTON, TX 77056-4400	Х		CEO and President	
Signatures				
Cheri L. Peper, Attorney-in-Fact	08	/27/2015		

\*\*Signature of Reporting Person

Date

## **Explanation of Responses:**

\* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.