FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT	OF CHANGES II	N RENEFICIAL	OWNERSHIP
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OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	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

Name and Address of Reporting Person* LONIC EDIC D		2. Issuer Name and Ticker or Trading Symbol USA Compression Partners, LP [USAC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
LONG ERIC D) X	Director	•	10% Ow		ner					
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)					_ X	Officer (below)	give title		Other (s below)	pecify			
C/O USA COMPRESSION PARTNERS, LP					12/05/2023						See Remarks							
111 CONGRESS AVENUE, SUITE 2400				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street))	X Form filed by One Reporting Person						
AUSTIN	T	X	78701									Form filed by More than One Reporting Person				ing		
(City)	(S	tate)	(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.										o satisfy							
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date			2. Transac Date (Month/Da	Execution Date,		r, Transaction Dispose Code (Instr.			rities Acquired (A) o ed Of (D) (Instr. 3, 4			Beneficial Owned Fo	es Form ally (D) of following (I) (In		Direct Indirect I	'. Nature of ndirect Beneficial Ownership		
						Code	v .	Amount	nt (A) or (D) Pr		Price	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)		
			Table II - D											Owned			,	
			(e.g., pu	ts, cal	ls, warr	ants	, options	s, co	nvertil	ble sec	urit	ies)					
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise (Instr. 3) 3. Transaction Date (Month/Day/Year) 3. Deemed Execution Date, if any (Month/Day/Year)		Cod	Transaction Code (Instr. Securi Acquir or Disport of (D) (Derivative Expirat		Date Exercisable and piration Date pnth/Day/Year)		7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)		Ownersh Form: Direct (D or Indired (I) (Instr.	Ownership	Beneficial Ownership (Instr. 4)		
				Cod	e V	(A)	(D)	Date Exercisable		piration te	Title	or Nu	nount mber Shares		(Instr. 4)			
Phantom Units	(1)	12/05/2023		A		157,803		(2)		(3)	Common	¹ 15	57,803	(1)	157,80	3	D	

Explanation of Responses:

- 1. Each phantom unit is the economic equivalent of one common unit of USA Compression Partners, LP (the "Issuer").
- 2. The phantom units vest incrementally, with 60% of the phantom units vesting on December 5, 2026 and 40% of the phantom units vesting on December 5, 2028.
- 3. In the event of the cessation of the Reporting Person's service for any reason, all phantom units that have not vested prior to or in connection with such cessation of service shall automatically be forfeited. Notwithstanding the foregoing, if the Reporting Person retires after attaining the age of 65-68, 60% of his then-unvested phantom units will be forfeited at the time of retirement. If the Reporting Person retires and is over age 68, 50% of his then-unvested phantom units will be forfeited at the time of retirement.

Remarks:

The Reporting Person is the President, Chief Executive Officer and Director of USA Compression GP, LLC, the general partner of the Issuer (the "General Partner"). The Issuer is managed by the directors and executive officers of the General Partner

> /s/ Eric D. Long 12/07/2023

** 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.