FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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* Scheller Eric A			2. Issuer Name and Ticker or Trading Symbol USA Compression Partners, LP [USAC]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Schener Enc A</u>				Director 10% Owner					
		(A.C. H.)	2 Date of Earliest Transaction (Manth/Day/Maar)	X Officer (give title Other (specify below) below)					
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/17/2021	See Remarks					
C/O USA COMPRESSION PARTNERS, LP			12/17/2021						
111 CONGRESS AVENUE, SUITE 2400		SUITE 2400							
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable					
(Street)				Line)					
AUSTIN	ТХ	78701		X Form filed by One Reporting Person					
				Form filed by More than One Reporting					
	(2) ()			Person					
(City)	(State)	(Zip)							

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	if any 🤺						5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Units	12/17/2021		М		8,231	Α	(1)	47,400	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of Deri Sec Acq (A) (Disp of (I	rivative (Month/Day/Year) icurities quired) or sposed (D) str. 3, 4		e and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Phantom Units ⁽²⁾	(1)	12/17/2021		м			8,231	(3)	(4)	Common Units	8,231	(1)	5,486	D	

Explanation of Responses:

1. Each phantom unit is the economic equivalent of one common unit of USA Compression Partners, LP (the "Issuer").

2. These phantom units were awarded on December 5, 2018.

3. These phantom units will vest incrementally, with 60% of the phantom units vesting on December 5, 2021 and the remaining 40% of the phantom units vesting on December 5, 2023.

4. 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. Remarks:

The Reporting Person is the Vice President and Chief Operating Officer 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 A. Scheller

** Signature of Reporting Person

12/20/2021

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.