FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

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

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* Baker Christopher J. | | | | | | 2. Issuer Name and Ticker or Trading Symbol KLX Energy Services Holdings, Inc. [? KLXE?] | | | | | | | | | all app | , | ng Pe | rson(s) to Is 10% Ov Other (s | wner |
|--|--|--|--|---|--|--|---|---|----------------------|---------|--------------------|---|------------------------|---|-------------------------------|--|--------------------------------------|--|---------------------------------------|
| (Last) (First) (Middle) 3040 POST OAK BOULEVARD, 15TH FLOOR | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/01/2021 | | | | | | | | | Λ | below | See R | emai | below) rks | | |
| (Street) HOUSTON TX 77056 | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | dividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting 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/Y | | | | Year) | Execution Date | | | 3. Transaction Code (Instr. 8) 4. Securities Disposed Of | | | | | nd 5) Securit | | ties cially I Following | Forn (D) c | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | | ction(s) | | | (111511.4) |
| Common stock 10/01/202 | | | | | 21 | 1 | | | s ⁽¹⁾ 6,0 | | 6,000 | D | \$4.718 | 4.7184 ⁽²⁾ | | 236,462 | | 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) | rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any | | | ution Date, / | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiration Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | | | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date | cisable | Expiration Date | Title | Number of Shares | | | | | | |

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person for tax and estate planning purposes.
- 2. The price reported in Column 4 is a weighted average price. These share were sold in multiple transactions on one day at prices ranging from \$4.65 to \$4.77. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.

Remarks:

President and Chief Executive Officer

/s/ Max L. Bouthillette, attorney-in-fact for

10/01/2021

Christopher J. Baker ** 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.