FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 | |
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|-------------|------|-------|--|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average burden | | | | | | | | | | |
| hours per response: 0 | | | | | | | | | | |

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* Willis Darryl Keith | | | | 2. Issuer Name and Ticker or Trading Symbol DRIL-QUIP INC [DRQ] | | | | | | | | | ationship k all app Direc | , | ng Per | rson(s) to Is | | | |
|--|--|--|-----------------|---|---------|--|------|---|-----------------|-----------------------------|---|--|-----------------------------------|---|--|--------------------|-------------|--|--|
| (Last) (First) (Middle) 6401 NORTH ELDRIDGE PKWY | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/01/2022 | | | | | | | | | Office below | er (give title | | Other (s below) | specify | | |
| (Street) HOUST(| ON TX | | 7041-35 Zip) | 505 | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Indi Line) X | ′ | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | Execution Date, | | 3. 4. Securities Acquired Disposed Of (D) (Instr. 8) 5. | | | | Securit Benefic Owned | 5. Amount of Securities Beneficially Owned Following Reported | | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | | | Code | v | Amount | (A) (D) | or P | rice | | ction(s) | | | (111511. 4) | | |
| Common Stock 04/01 | | | | | 2022 | | A | | 627(1) | | | \$0.00 | 6,574 | | | 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) | rative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any | | | saction de (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | | | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | y | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Numb of Share | | | | | | |

Explanation of Responses:

Remarks:

/s/ James C. Webster 04/04/2022 Attorney-in-Fact

** 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.

^{1.} This restricted stock award was granted pursuant to the Company's 2017 Omnibus Incentive Plan and therefore has no purchase or sales price. This restricted stock award was received in lieu of all or a portion of the quarterly fees related to the reporting person's service on the Board of Directors and its committees.