FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

issuer that is inten	conditions of Rule	the					
Name and Address of Reporting Person* Gable S Corp			2. Issuer Name and Ticker or Trading Symbol Aris Water Solutions, Inc. [ARIS]	S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			
(Last) PO BOX 129	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 12/27/2024	Officer (give title X Other (specify below) Over 5% but less than 10% own			
(Street) BROUSSARD	LA	70518	4. If Amendment, Date of Original Filed (Month/Day/Year)	Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X 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/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Class A Common Stock	12/27/2024		S		3,641	D	\$25.02(1)	2,631,150	I	See Footnotes ⁽²⁾⁽³⁾

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	 3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (In 8)		Derivative I		(Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
						Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		

1. Name and Address of Reporting Person * Gable S Corp (Last) (First) (Middle) PO BOX 129 (Street) **BROUSSARD** 70518 LA (City) (State) (Zip) 1. Name and Address of Reporting Person * Scott Sherman A (Last) (First) (Middle) **PO BOX 364** (Street) **DODGE** TX77334 (City) (State) (Zip)

Explanation of Responses:

- 1. The price reported represents the weighted average sale price per share. The shares were sold in multiple transactions at prices ranging from \$25.00 to \$25.06. Upon request by the staff of the U.S. Securities and Exchange Commission, the Issuer, or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price.
- 2. This statement is jointly filed by and on behalf of each of Gable S Corporation ("Gable") and Mr. Scott. Gable is the record and direct beneficial owner of the securities covered by this statement. Mr. Scott is the President and sole owner of, and may be deemed to beneficially own securities owned by, Gable.
- 3. Each reporting person disclaims beneficial ownership of the securities covered by this statement, except to the extent of the pecuniary interest of such person in such securities.

12/31/2024 Vanessa Derouen

Sherman A. Scott

12/31/2024 ** Signature of Reporting Person

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.