FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPRO	VAL				
OMB Number:	3235-0287				
Estimated average burd	en				
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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

					_									_								
1. Name and Address of Reporting Person*							2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
CHAMBERS THOMAS P							Kosmos Energy Ltd. [KOS]								Director				10% C	wner		
,		-												er (give title			(specify					
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year)									belov	,		,			
C/O KOSMOS ENERGY, LLC						12/01/2017									SVP and CFO							
8176 PARK LANE, SUITE 500																						
01/0 PARK LAINE, SUITE 500						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable							
(Street)					1	If a monamone, Date of Original Filed (World / Day) Teal)									Line)							
DALLAS TX 75231															X Form filed by One Reporting Person							
DILLING TX 75251				.										Form filed by More than One Reporting								
(City)	(St	ate) (Zip)													Person						
(Oity)	(50	uic) (
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of S	Security (Inst	r. 3)		2. Trans	action					3. 4. Securities Acquired (A)								6. Own		7. Nature		
				Date (Month/I	Day/Yea	ur) it	any	ecution Date, iny		Transaction Disposed (Code (Instr. 5)		Of (D	Of (D) (Instr. 3, 4			Securi Benefi	cially		orm: Direct D) or Indirect	of Indirect Beneficial		
							(Month/Day/Year)		8)					Owne Repor		l Following ted	(I) (Inst	i) (Instr. 4)	Ownership (Instr. 4)			
						Code	v	Amount		(A) or (D)	Price	,	Transaction(s) (Instr. 3 and 4)				,					
									1		0.000(- ` ' - 			<u>`</u>			ļ .				
Common	Shares	1/2017				F		9,866	(1) D \$		\$7.	.99	9 298,261		I)						
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
											onvertib				,							
1. Title of	2.	3. Transaction	3A. Deemed		4.					6. Date Exercisab		able and 7. Title and				Price of 9. Number of				11. Nature		
Derivative Security	Conversion or Exercise Price of Derivative	Date (Month/Day/Year)	Execution D		Transa Code (Expiratio (Month/D			Amount of Securities			Derivative Security		derivative Securities		Ownership Form:	of Indirect Beneficial		
(Instr. 3)			(Month/Da	ıy/Year)	8) `				(,			Underlying Derivative			(Instr. 5)		Beneficially Owned		Direct (D) or Indirect	Ownership (Instr. 4)		
Security						(A) or Disposed of (D) (Instr. 3, 4 and 5)		Security (Instr.				str. 3	3		Following		(i) (instr. 4)	(111301. 4)				
								and			and	and 4)				Reported Transaction	(s))				
																(Instr. 4)						
						П			Am	ount												
												or										
					l.,	1		Date		Expiration		of										
				- 1	Code	V	(A)	(D)	Exercisa	DIE	Date	Title	e Sha	res	I							

Explanation of Responses:

1. These shares were withheld by the Issuer to satisfy the tax withholding requirement arising from the vesting of restricted share units granted to the reporting person under the Issuer's Long Term Incentive Plan.

By: /s/ Richard Stephens, as Attorney-in-Fact

12/05/2017

** 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.