

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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

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

1. Name and Address of Reporting Person* <u>WEXFORD CAPITAL LP</u>  (Last) (First) (Middle) 411 WEST PUTNAM AVENUE SUITE 125  (Street) GREENWICH CT 06830  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Diamondback Energy, Inc. [ FANG ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  <input checked="" type="checkbox"/> Director 10% Owner  Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) 09/08/2015	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

**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)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			
Common Stock, par value \$0.01								77,054	D	
Common Stock, par value \$0.01	09/08/2015		S		11,853 <sup>(1)</sup>	D	\$67.5311	461,143	I	See footnotes <sup>(2)(3)</sup>
Common Stock, par value \$0.01	09/09/2015		S		35,580 <sup>(1)</sup>	D	\$67.9417	425,563	I	See footnotes <sup>(2)(3)</sup>
Common Stock, par value \$0.01	09/10/2015		S		2,000 <sup>(1)</sup>	D	\$66.9177	423,563	I	See footnotes <sup>(2)(3)</sup>

**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. Transaction Code (Instr. 8)		5. Number of Derivative 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 (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					

1. Name and Address of Reporting Person\*  
WEXFORD CAPITAL LP  
  
 (Last) (First) (Middle)  
 411 WEST PUTNAM AVENUE  
 SUITE 125  
  
 (Street)  
 GREENWICH CT 06830  
  
 (City) (State) (Zip)

1. Name and Address of Reporting Person\*  
JACOBS JOSEPH  
  
 (Last) (First) (Middle)  
 C/O WEXFORD CAPITAL LP  
 411 WEST PUTNAM AVENUE, SUITE 125  
  
 (Street)  
 GREENWICH CT 06830

(City)	(State)	(Zip)
1. Name and Address of Reporting Person*		
<a href="#">DAVIDSON CHARLES E</a>		
(Last)	(First)	(Middle)
<a href="#">C/O WEXFORD CAPITAL LP</a>		
<a href="#">411 WEST PUTNAM AVE.</a>		
(Street)		
<a href="#">GREENWICH</a>	<a href="#">CT</a>	<a href="#">06830</a>
(City) (State) (Zip)		

(City)	(State)	(Zip)
1. Name and Address of Reporting Person*		
<a href="#">Wexford GP LLC</a>		
(Last)	(First)	(Middle)
<a href="#">C/O WEXFORD CAPITAL LP</a>		
<a href="#">SUITE 125</a>		
(Street)		
<a href="#">GREENWICH</a>	<a href="#">CT</a>	<a href="#">06830</a>
(City) (State) (Zip)		

**Explanation of Responses:**

- The securities disposed of were held by DB Energy Holdings LLC ("DB Energy"), Wexford Catalyst Fund, L.P. ("WCF"), Wexford Spectrum Fund, L.P. ("WSF"), Spectrum Intermediate Fund Limited ("SIF") and Catalyst Intermediate Fund Limited ("CIF" and, together with DB Energy, WCF, WSF and SIF, the "Funds").
- This form is jointly filed by Wexford, Charles E. Davidson ("Davidson"), Joseph M. Jacobs ("Jacobs"), and Wexford GP LLC ("Wexford GP"). The common stock shown as beneficially owned by Davidson, Jacobs, Wexford GP and Wexford reflect common stock owned of record by the Funds. Wexford serves as manager, investment advisor or sub advisor of each of the Funds, and as such may be deemed to share beneficial ownership of the securities beneficially owned by the Funds. Wexford GP, as the general partner of Wexford, may be deemed to share beneficial ownership of the securities beneficially owned by the Funds. (continued under Footnote (3) below)
- (continued from Footnote (2) above) Davidson and Jacobs, as the controlling persons of Wexford GP, may be deemed to share beneficial ownership of any securities beneficially owned by the Funds for which Wexford serves as manager, investment advisor or sub advisor. Each of the Reporting Persons disclaims beneficial ownership of the securities reported herein, except to the extent of his or its actual pecuniary interest therein.

**Remarks:**

<a href="#">Wexford Capital LP, By:</a>	
<a href="#">Wexford GP LLC, its general partner By: Arthur Amron,</a>	<a href="#">09/10/2015</a>
<a href="#">Vice President and Assistant Secretary</a>	
<a href="#">Wexford GP LLC, By: Arthur Amron, Vice President and Assistant Secretary</a>	<a href="#">09/10/2015</a>
<a href="#">Charles E. Davidson</a>	<a href="#">09/10/2015</a>
<a href="#">Joseph M. Jacobs</a>	<a href="#">09/10/2015</a>
** 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.