FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
	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(h)

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

1 Name and	-l A -l -l	- f D	_*								_	mhol			15	Rela	tionshii	n of Reportin	n Perso	nn(s) to Is	SUET			
Name and Address of Reporting Person*     Rubin James L.						2. Issuer Name and Ticker or Trading Symbol Viper Energy Partners LP [ VNOM ]										5. Relationship of Reporting Person(s) to Is (Check all applicable)					Suci			
Kubin James L.																	Direc			10% C				
(Last) (First) (Middle) C/O WEXFORD CAPITAL LP						3. Date of Earliest Transaction (Month/Day/Year) 08/24/2016											Office below	er (give title v)		Other below)	specify			
411 WEST PUTNAM AVE, SUITE 125							If Amendment, Date of Original Filed (Month/Day/Year)											Individual or Joint/Group Filing (Check Applicable						
(Charach)						, , , , , ,											Line)  X Form filed by One Reporting Persor							
(Street) GREENWICH CT 06830																	Form filed by One Reporting Person  Form filed by More than One Reporting  Person							
(City)	(	State)	(Zip)																					
		Ta	ble I - No	n-Deriv	ative	Se	curitie	s Ac	quire	d, Di	sp	osed o	f, or	Bene	efici	ally	Owne	ed						
1. Title of Security (Instr. 3)  2. Transa Date (Month/L						ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		Cod	Transaction Di		4. Securit Disposed 5)	4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			r ınd	Securities Beneficially		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Cod	le V		Amount		(A) or (D)	Pric	e	Transaction(s) (Instr. 3 and 4)				(IIISU. 4)						
Common Units representing limited partner interests 08/24/									A <sup>(</sup>	1)		5,424	(1)	1) <b>A</b>		60	5,424(1)		Г	<b>)</b> (1)				
			Table II - I (									sed of, on the second s					vned							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transactio Code (Instr 8)		of Deriv Secu Acqu (A) o Dispo	r osed ) r. 3, 4	6. Date Exercisab Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)		str. 3		tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	nership rm: ect (D) Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code V		(A)	(D)	Date Exerci	sable		xpiration ate	Title	or Nun of	ount nber res									

## **Explanation of Responses:**

1. On August 24, 2016, the reporting person was granted 5,424 phantom units, of which 1,808 vested and settles on the date of grant. The remaining 3,616 phantom units will vest and settle in two equal annual installments beginning on June 17, 2017. Each phantom unit is the economic equivalent of one common unit representing a limited partner interest in the Issuer. These phantom units have been assigned to Wexford Capital LP under the terms of Mr. Rubin's employment with Wexford Capital LP. As a result, Mr. Rubin disclaims any pecuniary interest in these phantom units.

08/25/2016 James L. Rubin

\*\* 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.