FORM 4

obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES I	N BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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 Address of Reporting Person* <u>Hairford Matthew V</u>					2. Issuer Name and Ticker or Trading Symbol Matador Resources Co [MTDR]								(Che	5. Relationship of Repor (Check all applicable) Director Officer (give title			10%	Owner		
(Last) (First) (Middle) 5400 LBJ FREEWAY SUITE 1500				3. Date of Earliest Transaction (Month/Day/Year) 06/07/2019)	X Officer (give title below) President Other (specification)						
(Street) DALLAS			75240		_ 4. If	Amer	idment,	, Date o	of Original Filed (Month/Day/Year)					Line	Individual or Joint/Group Filing (Check Application) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(51	•	(Zip)	on-Deriv	/ative	Sec	uritie	s Ac	auirea	l. Di	sposed o	f. or F		 iciall	v Owne	ed ee				
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) o			or	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
						Code	v	Amount	(A) o	r Pri	се	Reported Transaction(s) (Instr. 3 and 4)				(instr. 4)				
Common Stock		06/07/2019				P		2,000	00 A		6.78	8,000		I		Represents shares held of record by the reporting person's Individual Retirement Account.				
Common	Common Stock 04/09			04/09/	2019	019			G	V	36,280	D		\$ <mark>0</mark>	43,552(1)(2)		D			
Common	Stock			04/09/	2019				G	v	36,280	A		\$ <mark>0</mark>	298,898 ⁽³⁾ I			See footnote ⁽⁴⁾		
		Ţ	able II -								osed of, convertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	on Date,	4. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rative rities ired r osed)	6. Date Expirat (Month)	ion Da /Day/Y		7. Title Amoun Securi Underl Deriva Securi and 4)	nt of ties ying	D Si (li	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i C F Ily C	LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. Includes 31,446 shares of restricted stock granted to the reporting person on February 16, 2018 that vest in equal annual installments on the second and third anniversaries of the date of grant.
- 2. Includes 12,106 shares of restricted stock granted to the reporting person on February 15, 2017 that vest on the third anniversary of the date of grant.
- 3. The reporting person states that neither the filing of this statement nor anything herein shall be deemed an admission that such person is, for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, or otherwise, the beneficial owner of these shares. The reporting person disclaims beneficial ownership of these shares, except to the extent of his pecuniary interest therein.
- 4. Represents shares held of record by the Hairford Family Trust for which both the reporting person and his spouse are trustees.

Remarks:

/s/ Matthew V. Hairford, by Kyle A. Ellis as attorney-in-

06/11/2019

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.