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						
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(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

1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol ENTERPRISE PRODUCTS PARTNERS L									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
BACHMANN RICHARD H							P [EPD]									X Director		10% Owner			
,					- - '		- 1								Officer below	(give title		Other (s	specify		
(Last) (First) (Middle)							Date of Earliest Transaction (Month/Day/Year)											below)			
2727 NORTH LOOP WEST						12/06/2004									ΕΣ	ecutive V	ice Pr	esident			
-														-							
(Street)					4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Cl Line)					
HOUSTON TX 77008		77008												,	Form filed by One Reporting Person						
			-											Form filed by More than One Reporting							
(City)	(S	tate)	(Zip)													Person					
(Oity)	(0		(2.12)																		
		Tab	le I - Nor	n-Deri	vative	Sec	curiti	es A	cquired,	Dis	posed (of, or E	Bene	ficiall	y Owne	t					
1. Title of	Security (Ins	tr. 3)		2. Trans	saction	1 2	A. Deei	3.	3. 4. S			4. Securities Acquired (A)			ınt of	6. Ownership Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial			
	, (-,		Date	th/Day/Year)		Execution Date, if any		, Transaction Code (Instr.					3, 4 and	Securiti Benefic						
				(WOITE	Dayric		(Month/Day/Year)		ar) 8)	r) 8)]"			Owned	Owned Following		str. 4)	Ownership		
									Code	v	Amount	(A)	or	Price	Reporte Transac	tion(s)		- 1	(Instr. 4)		
									Code	Ľ	Amount	(D)		riice	(Instr. 3	and 4)					
Common	Units Repr	esenting Limited	C/200	.					1 00			\$23.7°		88,942		_					
Partnersh	ip Interests	6/2004	١,			P		1,00	0 1	A \$23		2 00,942		D							
			- 1-1 - 11	D	4:								6:	- : - 11	0						
		'	able II -						quirea, L s, optioi			,		•	Ownea						
	1				Juis,	cans	-												1		
1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution		4. Transa	ction	on of E			6. Date Exercisable and Expiration Date			and Ar	nount	8. Price of Derivative	9. Number derivative		LO. Ownership	11. Nature of Indirect Beneficial Ownership		
Security	or Exercise Price of		if any (Month/Da	· 1	Code (8)				(Month/Day/Year)	Underlying Derivative Seco			Security	Securities Beneficiall	F	orm:			
(Instr. 3)	Derivative				8)							(Instr. 3 and 4)			(Instr. 5)	Owned	´ o	Direct (D) or Indirect	(Instr. 4)		
	Security														Following Reported	((I) (Instr. 4)				
							of (D)								Transactio (Instr. 4)	n(s)				
							(Instr. 3, 4 and 5)									(111301. 4)					
													An	nount							
													or	mber							
							l	I	Date		piration	 	of								
					Code	٧	(A)	(D)	Exercisab	le D	ate	Title	Sh	ares			_				
Employee Unit																					
Options -	\$7.75								04/16/200	2 09	0/30/2009	Commr Units	40	,000		40,000		D			
Right to Buy #98-6												Cints									
			<u> </u>				1			+			+				-+				
Employee Unit																					
Options -	\$15.925								01/31/200	$\begin{bmatrix} 1 \\ 0 \end{bmatrix}$	/21/2010	Commo	n 40	,000		80,000		D			
Right to Buy #98-												Units	1.0	,,,,,,]					
95																					
Employee							ĺ			\neg				T							
Unit Options -												Commo									
Right to	\$20								05/10/200	8 05	5/10/2014	Commo Units	" 35	,000		115,000		D			
Buv #98-	I	I	I	- 1			1	1	I			1	- 1	- 1		I	- 1		1		

Explanation of Responses:

Remarks:

Richard H. Bachmann

12/06/2004

** Signature of Reporting Person Da

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).