

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>EL PASO CORP/DE</u> (Last) (First) (Middle) <u>1001 LOUISIANA ST</u> <u>SUITE 2955A</u> (Street) <u>HOUSTON TX 77002</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>GULFTERRA ENERGY PARTNERS L P [GTM]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>10/31/2003</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person

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 Units	10/31/2003		s		590,000	D	\$40.6	8,262,902	I	(1) ⁽¹⁾

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)		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	Date Exercisable	Expiration Date					

1. Name and Address of Reporting Person*
EL PASO CORP/DE
 (Last) (First) (Middle)
1001 LOUISIANA ST
SUITE 2955A
 (Street)
HOUSTON TX 77002
 (City) (State) (Zip)

1. Name and Address of Reporting Person*
DEEPTech INTERNATIONAL INC
 (Last) (First) (Middle)
 (Street)
 (City) (State) (Zip)

1. Name and Address of Reporting Person*
EL PASO FIELD SERVICES HOLDING CO
 (Last) (First) (Middle)
 (Street)
 (City) (State) (Zip)

1. Name and Address of Reporting Person*

[SABINE RIVER INVESTORS I LLC](#)

(Last) (First) (Middle)

(Street)

(City) (State) (Zip)

1. Name and Address of Reporting Person*

[SABINE RIVER INVESTORS II LLC](#)

(Last) (First) (Middle)

(Street)

(City) (State) (Zip)

1. Name and Address of Reporting Person*

[EL PASO TENNESSEE PIPELINE CO](#)

(Last) (First) (Middle)

[EL PASO BLDG.
1001 LOUISIANA STREET](#)

(Street)

[HOUSTON TX 77095](#)

(City) (State) (Zip)

1. Name and Address of Reporting Person*

[EL PASO ENERGY PARTNERS CO LLC](#)

(Last) (First) (Middle)

[4 GREENWAY PLAZA](#)

(Street)

[HOUSTON TX 77046](#)

(City) (State) (Zip)

Explanation of Responses:

1. by Sabine River Investors I, L.L.C., which is a wholly owned subsidiary of El Paso Energy Partners Company L.L.C., which is a wholly owned subsidiary of DeepTech International Inc., which is a wholly owned subsidiary of El Paso Corporation (El Paso).

[David L. Siddall \(POA\)](#)

[11/03/2003](#)

** 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.