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## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 but	rden					
hours per response:	0.5					

1. Name and Address of Reporting Person <sup>*</sup> CREEL MICHAEL A		rson*	2. Issuer Name and Ticker or Trading Symbol <u>ENTERPRISE PRODUCTS PARTNERS L</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last)	(First)	(Middle)	<u>P</u> [ EPD ]	X	Officer (give title below)	Other (specify below)		
1100 LOUISIANA STREET		(made)	3. Date of Earliest Transaction (Month/Day/Year) 02/19/2013	Chief Executive Officer				
<b>SUITE 1000</b>								
(Street)	0 LOUISIANA STREET ITE 1000 et)		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)				
HOUSTON	ТХ	77002		X	Form filed by One Rep	oorting Person		
(City)	(State)	(Zip)			Form filed by More that Person	n One Reporting		

### 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. Transa Code ( 8)				5. Amount of Securities Beneficially Owned Following Reported	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	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Units Representing Limited Partnership Interests	02/19/2013		A		72,200	A	\$0.00	784,212	D	
Common Units Representing Limited Partnership Interests	02/21/2013		F		7,551	D	\$55.91	776,661	<b>D</b> <sup>(1)</sup>	

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of 3. Transaction 3A. Deemed 5. Number 6. Date Exercisable and 7. Title and 8. Price of 9. Number of 11. Nature 10 Conversion Expiration Date (Month/Day/Year) Amount of Securities derivative Securities Derivative Date Execution Date Transaction of Derivative Ownership of Indirect (Month/Day/Year) Derivative Security Code (Instr. or Exercise if any Security (Instr. 5) Form: Beneficial Direct (D) or Indirect (Instr. 3) Price of Derivative (Month/Dav/Year) Underlying Derivative 8) Securities Beneficially Ownership Acquired Owned (Instr. 4) (A) or Disposed of (D) Security (Instr. 3 (I) (Instr. 4) Security Following Reported Transaction(s) and 4) (Instr. 3, 4 and 5) (Instr. 4)

Expiration

Date

Explanation of Responses:

1. The power of attorney under which this form was signed is on file with the Commission.

#### Remarks:

Transaction Code A - Grant, award or other acquisition pursuant to Rule 16b-3(d); Transaction Code F - Payment of exercise price or tax liability by delivering or withholding securities incident to the receipt, exercise or vesting of a security issued in accordance with Rule 16b-3

Date

Exercisable

/s/Wendi S. Bickett, Attorneyin-Fact on behalf of Michael A. 02/21/2013 Creel

\*\* Signature of Reporting Person Date

Amount or Number

Shares

of

Title

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).

ν

Code

(A) (D)

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.