FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

vvasimigton, b.c. 200

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
hours por rospons	o. 0 F									

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* TEAGUE AJ (Last) (First) (Middle) 1100 LOUISIANA STREET SUITE 1000 (Street) HOUSTON TX 77002 (City) (State) (Zip)					EI P 3. 1 03.	NTE [EP: Date of /10/2	D] of Earl	iest Trans	saction (M	onth/	Symbol S PART Day/Year) I (Month/Da		<u> </u>	EVP (cable) or (give title & Chief C Doint/Group iled by One iled by Mor	Operating Filing (Class Reporting)	10% Ow Other (s below) g Office	pecify Per
(City)	`	Tab	(Zip) ole I - No	_		_			quired,	Dis				Ily Owned		6. Owner	rshin 3	7. Nature
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		ar) l	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr.					Securitie Beneficia	s ally following	Form: Direct (D) or Indirect (I) (Instr. 4)	rect direct E	of Indirect Beneficial Ownership Instr. 4)
									Code	v	Amount	(A) or (D)	Price	Transact (Instr. 3	ion(s)			
Common Units Representing Limited Partnership Interests				02/0	1/201	2			М		60,000) A	A \$30.9		593,851(1)(2)(3)			
Common Units Representing Limited Partnership Interests					1/201	2			F		43,477	7 D	\$50.	11 550	550,374			
Common Units Representing Limited Partnership Interests				03/1	3/10/2008				P		20	0 A \$2		56 187	187,079		- 1	By spouse
Common Units Representing Limited Partnership Interests														26	26,500			By rust ⁽²⁾
		-									osed of, convertil			y Owned				
Derivative Conversion Dat		3. Transaction Date (Month/Day/Year)	Execution Date, if any			Transaction Code (Instr.		n of		6. Date Exercisa Expiration Date (Month/Day/Year		of Securities		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction (Instr. 4)	Own Fo Illy Dir or (I)	vnership rm: ect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal	ole	Expiration Date	Title	Amount or Number of Shares	1				
Employee Unit Option- Right To Buy	\$30.96	02/01/2012			M			60,000	02/01/20	12	12/31/2012	Common Units	60,000	\$0.00	0		D ⁽⁴⁾	

Explanation of Responses:

- 1. A portion of these units were acquired under the issuer's employee unit purchase plan.
- 2. The amount included in Table I, Box 5 of the filings made on May 17, 2011, June 1, 2011, and September 9, 2011 inadvertently overreported the number of Common Units by 26,500.
- 3. Includes Common Units granted to the Reporting Person that have restricted vesting dates and are subject to forfeiture.
- 4. The power of attorney under which this form was signed is on file with the Commission.

Remarks:

Transaction Code M - Exercise or conversion of derivative security exempted pursuant to Rule 16b-3; 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; Transaction Code P - Open market or private purchase of non-derivative or derivative security

/s/Wendi S. Bickett, Attorney-

in-Fact on behalf of A.J.

02/03/2012

Teague

** 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.