FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person* KATZ STUART B					2. Issuer Name and Ticker or Trading Symbol W&T OFFSHORE INC [WTI]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_Director 10% Owner						
(Last) (First) (Middle) C/O JEFFERIES CAPITAL PARTNERS, 520 MADISON AVE					3. Date of Earliest Transaction (Month/Day/Year) 02/02/2005							Off	icer (give title b	elow)	Other (specify be	elow)		
NEW YORK, NY 10022				4. I	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person							
(City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
1.Title of Security (Instr. 3)			Date	h/Day/Year)	Execu any	Deemed cution Date, if	(Instr. 8)		on 4. Securities Acquire or Disposed of (D) (Instr. 3, 4 and 5)		Bene Repo		mount of Securities eficially Owned Following orted Transaction(s) r. 3 and 4)		Form:	7. Nature of Indirect Beneficial Ownership		
				(Wionali Bay) Tear)			Code	V	Amou	ınt	(A) or (D)	Price				or Indirect (I) (Instr. 4)		
Common Stock		02/02/2005			S 7,501,152 D		D	\$ 17.70	2,62	2,654		I	(1)					
Reminder:	Report on a s	separate line	for each	Table II					P c tr	ersons v ontained ne form o	vho l in t displ	his fo	rm are curre	e not rec ntly vali	uired to re d OMB co	nformation espond unles ntrol number	s	1474 (9-02)
1 77:1 6		la m		24 5 1	(e.g.,		lls, v			ons, conv					0.00	0.37 1 0	1.0	
Security	2. Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year) any (Code (Instr. 8) Of Derivative Securities (Month/Day/Year)		Amo Unde Secur	tle and unt of crlying rities r. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)									
						Code	V	(A) (I		ate ercisable		iration e	Title	Amount or Number of Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
KATZ STUART B C/O JEFFERIES CAPITAL PARTNERS 520 MADISON AVE NEW YORK, NY 10022	X						

Signatures

Price W. Wilson, Attorney-in-fact	02/03/2005		
**Signature of Reporting Person	Date		

Explanation of Responses:

- * 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).

Remarks

(1) Mr. Katz has an interest in Jefferies Capital Partners (a/k/a FS Private Investments III LLC and referred to hereinafter as "JCP"). JCP controls the investment and voting power in respect of all of the 2,622,654 shares of Common Stock disclosed herein (the "Total Shares") by virtue of its management of three funds that directly hold such shares (the "JCP Funds"). Mr. Katz also has limited partnership interests in the JCP Funds. Mr. Katz, however, does not control JCP or the JCP Funds. Mr. Katz disclaims beneficial ownership of the Total Shares except to the extent of his proportionate pecuniary interest therein resulting from his direct or indirect interests in JCP and the JCP Funds.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.