FORM 5

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

OMB APPR	OVAL
OMB Number:	3235-0362
Estimated average	e burden
	- 10

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 3 Holdings Reported Form 4 Transactions

Reported

ANNUAL 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

1. Name and Address of Reporting Pe KROHN TRACY W	erson*	2. Issuer Name and W&T OFFSHO		2 ,	ool		5. Relationship of Reporting Po (Check all ap						
(Last) (First)	(Middle)	3. Statement for Is (Month/Day/Year)		ear Ended			X Officer (give title below) Chairman	Other (spec	ify below)				
C/O W&T OFFSHORE INC., GREENWAY PLAZA, SUITI		12/31/2011											
(Street)		4. If Amendment,	Date Original F	iled(Month/	/Day/Year)	6. Individual or Joint/Group Ro						
HOUSTON, TX 77046							_X_Form Filed by One Reporting Person Form Filed by More than One Reporting Person						
(City) (State)	(Zip)	Ta	ble I - Non-De	rivative S	ecuritie	s Acqu	uired, Disposed of, or Beneficia	illy Owned					
1.Title of Security (Instr. 3)			3. Transaction Code (Instr. 8)	(A) or Di (D) (Instr. 3,	sposed 4 and 5 (A) or	of	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership				
COMMON STOCK	11/24/2011		G	27,225	D	\$ 0	39,206,962	D					
COMMON STOCK	11/24/2011		G	27,225	A	\$ 0	27,225	Ι	By the Krohn 2008 Irrevocable Trust (1)				

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

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 control number.

SEC 2270 (9-02)

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

1. Title of	2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	cisable	7. Titl	le and	8. Price of	9. Number	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	Numb	oer	and Expiration	on Date	Amou	ınt of	Derivative	of	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Under	rlying	Security	Derivative	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	ative			Secur	rities	(Instr. 5)	Securities	Derivative	Ownership
	Derivative				Secur	ities			(Instr.	. 3 and		Beneficially	Security:	(Instr. 4)
	Security				Acqu	ired			4)			Owned at	Direct (D)	
					(A) o	r						End of	or Indirect	
					Dispo	sed						Issuer's	(I)	
					of (D))						Fiscal Year	(Instr. 4)	
					(Instr	. 3,						(Instr. 4)		
					4, and	15)								
										Amount				
										or				
								Expiration		Number				
							Exercisable	Date		of				
					(A)	(D)				Shares				

Reporting Owners

		Re	elationships	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
KROHN TRACY W C/O W&T OFFSHORE INC. NINE GREENWAY PLAZA, SUITE 300 HOUSTON, TX 77046	X	X	Chairman & CEO	

Signatures

s/ By Thomas F. Getten, attorney-in-fact	01/19/2012
**Signature of Reporting Person	Date
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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).
- These shares are held in the Krohn 2008 Irrevocable Trust, the beneficiaries of which are the Reporting Person's children. The Reporting Person disclaims beneficial (1) ownership of these shares, and this report shall not be deemed an admission that the Reporting person is the beneficial owner of the shares for purposes of Section 16 or for any other purpose.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.