FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|---------------------|----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | |
| Estimated average b | ourden | | | | | | | |

0.5

hours per response:

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* MOORE TIM | | | | | PL | 2. Issuer Name and Ticker or Trading Symbol PLAINS ALL AMERICAN PIPELINE LP PAA | | | | | | | | | heck | all app | licable) | g Person(s) to Issu 10% Ow Other (sp | | wner |
|--|--|-----|---------------------|-----------------------------|---|---|----------------------|-----------------------|---|-----|---------------------|---|-----|-------------------------|--|--|---|--|--|------------|
| (Last) (First) (Middle) 333 CLAY STREET, # 1600 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/08/2005 | | | | | | | | | | X Officer (give title Offier (spec below) below) Vice President & Sec. | | | | | |
| (Street) HOUST(| | | 77002 (Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Indivi ne) X | Form | al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson | | | | |
| | | Tab | le I - No | n-Deriv | ative | Se | curitie | es Ac | quired, | Dis | posed o | f, or | Ben | eficia | ally C | Dwne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | Execution Da | | | Code (Instr. | | | | | | 4 and Sec Ber Owi | | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | Amount (A) or (D) | | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) |
| Common Units 08 | | | | 08/08 | 8/2005 | | | | S | | 3,500 | D \$ | | \$46. | .68 | 1 | 7,418 | D | | |
| | | Ta | | | | | | | | | sed of, onvertib | | | | / Ow | ned | | | | |
| 1. Title of Derivative Security (Instr. 3) | | | n Date, ay/Year) | Transaction Code (Instr. 8) | | of Derive Secuence (A) of Disperior of (D | osed) r. 3, 4 | Expiratio (Month/D | Date Exercisable and xpiration Date Month/Day/Year) ate Expiration xercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares | | | ce of ative rity . 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owner Form Direct or Ind (I) (In | t (D) lirect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

Remarks:

Tim Moore

08/08/2005

** 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.