FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
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OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

| Name and Address of Reporting Person* VAL TINA L | | | | | | 2. Issuer Name and Ticker or Trading Symbol PLAINS ALL AMERICAN PIPELINE LP PAA | | | | | | | | | Check all a Dir | | | Person(s) to Issuer 10% Owner Other (specify | |
|--|---|------|------------------|---------|--------------------------------|---|--|--|---------|---|---------------------|---|--|-------|--|--|-------------------------------|--|--|
| (Last) (First) (Middle) 333 CLAY STREET, # 1600 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/02/2005 | | | | | | | | | ^ bel | ow) | below) t - Acctg & CAO | | |
| (Street) HOUSTON TX 77002 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 5. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tabl | e I - Nor | n-Deriv | ative | Se | curiti | es Ac | quired, | Dis | posed o | of, or | Ben | efici | ally Owi | ned | | | |
| Date | | | | | Date (Month/Day/Year) | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dispose Code (Instr. 5) | | rities Acquired (A) ed Of (D) (Instr. 3, 4 | | | nd Secu Bene Own | nount of irities eficially ed Following | Form: | nership Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | | v | Amount | | (A) or (D) | Price | Tran | Reported Transaction(s) Instr. 3 and 4) | | | (IIISU. 4) |
| Common Units 08/02/ | | | | | | 2005 | | S | | 3,687 | | D | \$40 | 5.6 | .6 0 | | D | | |
| | | Та | ıble II - D (| | | | | | | | sed of, onvertib | | | | y Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any | | | Date, | 4. Transaction Code (Instr. 8) | | n of Der Sec Acc (A) Disp of (I (Ins and | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Date Exercisable and Expiration Date Month/Day/Year) Date Expiration Expiration Exercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Number of Title Shares | | 8. Price of Derivative Security (Instr. 5) | | / Ov Fo Di or (I) | wnership orm: rect (D) Indirect (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

Remarks:

Tina Val

08/02/2005

** 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.