FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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- 1							
	OMB Number:	3235-0287					
	Estimated average burden						
	hours per response:	0.5					

OMB APPROVAL

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* Moxley Joel D												eck all appl Direc	cable) or	10% Owner		ner					
(Last) (First) (Middle) 700 LOUISIANA STREET SUITE 2550					3. Date of Earliest Transaction (Month/Day/Year) 01/16/2015							A below	C Officer (give title Other (specify below) SVP - Operations Services								
(Street) HOUSTON TX 77002					4. If Amendment, Date of Original Filed (Month/Day/Year) 01/21/2015					6. 1	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person										
(City) (State) (Zip)																					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
Date				Saction 2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Of (D Code (Instr.			es Acquired (A) or Of (D) (Instr. 3, 4 and 5)		unt of es ially Following	Form:	Direct II Indirect E str. 4)	. Nature of ndirect Beneficial Ownership							
						Code	v	Amount	nt (A) or (D)		Report Transa (Instr. 3	tion(s)	ion(s)		Instr. 4)						
Common Units								40,013 ⁽¹⁾ D													
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code (5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		•	7. Title and Amount Securities Underlyi Derivative Security (Instr. 3 and 4)			derivat Securit	ive ies cially ng	Ownership C Form: E Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)							
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount of Number of Shares		Transa (Instr. 4	ction(s)						
Phantom Units	(2)	01/16/2015		A		46,429 ⁽³⁾		(4)		(4)	Common Units	46,429	\$0.00	46,	429	D					
Phantom Units	(2)	02/06/2015		A		882.9858 ⁽⁵⁾		(4)		(4)	Common Units	882.985	8 \$0.00	47,31	1.9858	D					

Explanation of Responses:

- $1. \ Includes \ restricted \ units \ granted \ under \ the \ Crestwood \ Equity \ Partners \ LP \ Long \ Term \ Incentive \ Plan, \ as \ amended.$
- 2. Each phantom unit is the economic equivalent of one common unit representing a limited partnership interest in CEQP.
- 3. On the original filing, it was inadvertently stated that the units were disposed of.
- 4. The forfeiture restrictions on the phantom units shall lapse, and the phantom units shall vest and convert to an equal number of common units on the third (3rd) anniversary of the grant date.
- S. Represents additional Phantom Units received by the Reporting Person pursuant to the terms of previously granted Distribution Equivalent Rights. Each Distribution Equivalent Rights with a value equal to the amount of distribution Equivalent Rights, the Reporting Person receives a number of additional Phantom Units in respect of each Distribution Equivalent Rights with a value (based on the closing price of CEQP's common units on the record date (\$7.23) equal to the per unit amount of the distribution.

Remarks:

/s/ Judy Riddle, attorney-in-fact for Joel D. Moxley

02/10/2015

** 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.