FORM 4

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

| OMB APPROVAL | | | | | | |
|--------------------------|-----------|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | |
| Estimated average burden | | | | | | |
| nours per response | | | | | | |

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* GIBARA SAMIR G | | | | 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) NINE GREENWAY PLAZA, SUITE 300 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/21/2011 | | | | | | | y/Year) | • | Office | r (give title belo | ow) | Other (specify | below) | _ |
| (Street) | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| HOUST | ON, TX 77 | 046 | | | | | | | | | | | | , a o j 111010 unan | one responding | | | |
| (City | r) | (State) | (Zip) | | | Ta | ble I | - Non | -Deri | ivative | Securities . | Acqui | red, Dispo | osed of, or I | Beneficially | Owned | | |
| (Instr. 3) Da | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Dat any | | Code (Instr. 8) | | ction | A. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | | Form: | of India Benefic | 7. Nature of Indirect Beneficial | | | |
| | | | | (Month/Day/Year) | | | ode | V | Amour | (A) or nt (D) | Price | (Instr. 3 and 4) | | Direct (D) or Indirect (I) (Instr. 4) | | | | |
| СОММС | ON STOCK 11/21/20 | | 11/21/2011 | | | | P | · | 2,220 | \$ | 8.06 | 21,528 | | D | | | | |
| | | | Table II - 1 | | | | | 1 quire | the fo | orm dis | splays a c | currer eficiall | ntly valid | | spond unle trol numbe | | | |
| | 1_ | | | | | | | | | | tible secur | | | I | | | 1 | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | e (Month/Day/Y | Execution Da any | te, if | Code of Deriv Secur Acqu (A) oc Disput of (D (Instr. 8) | | Numbor Of Deriv Secur Acqu (A) of Disposof (D) (Instr | tumber f (More erivative ecurities cquired A) or isposed | | ate Exercisable Expiration Date nth/Day/Year) | | Amo Unde Secu | tle and ount of erlying rities r. 3 and | | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owners Form of Derivati Security Direct () or Indire | ship of I f Ben tive Ow (Ins (D) | Nature Indirect neficial vnershij str. 4) |
| | | | | | Code | V | (A) | | Date Exer | cisable | Expiration Date | Title | Amount or Number of Shares | ber | | | | |

Reporting Owners

| | Relationships | | | | | | |
|-----------------------------------------------------|---------------|--------------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| GIBARA SAMIR G | 37 | | | | | | |
| NINE GREENWAY PLAZA, SUITE 300 HOUSTON, TX 77046 | X | | | | | | |

Signatures

| /s/ Thomas F. Getten, attorney-in-fact | 11/23/2011 |
|----------------------------------------|------------|
| **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).

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.