

ATLAS PIPELINE PARTNERS LP
 Form 4/A
 January 29, 2008

FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
Firth Robert R

 (Last) (First) (Middle)
**WESTPOINTE CORPORATE
 CENTER ONE, 1550
 CORAOPOLIS HEIGHTS RD. 2ND
 FL.**

 (Street)
MOON TOWNSHIP, PA 15108

 (City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
**ATLAS PIPELINE PARTNERS LP
 [APL]**

3. Date of Earliest Transaction
 (Month/Day/Year)
12/12/2007

4. If Amendment, Date Original Filed(Month/Day/Year)
12/13/2007

5. Relationship of Reporting Person(s) to Issuer
 (Check all applicable)

 Director 10% Owner
 Officer (give title below) Other (specify below)
President of APL Mid-Continent

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
			Code	V	Amount	(D)	Price
Common Units	12/12/2007		G	V	12,000	D	\$ 0
					36,200	(1)	D

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 1474 (9-02)

Edgar Filing: ATLAS PIPELINE PARTNERS LP - Form 4/A

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)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Notation of Derivative Security (Instr. 5)
				Code V (A) (D)		Date Exercisable Expiration Date	Title Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

Firth Robert R
 WESTPOINTE CORPORATE CENTER ONE
 1550 CORAOPOLIS HEIGHTS RD. 2ND FL.
 MOON TOWNSHIP, PA 15108

President of APL Mid-Continent

Signatures

Lisa Washington,
 Attorney-in-Fact 01/29/2008

 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).
 Includes 1,500 phantom units granted under the Atlas Pipeline Partners, L.P. (the "Partnership") Long-Term Incentive Plan (the "Plan") which vests 50% per year beginning on March 16, 2008 and 17,250 phantom units granted under the Plan which vest 33% per year beginning on January 24, 2009. Each phantom unit represents the right to receive, upon vesting, one common unit of limited partner interest of the Partnership.

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.