

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 Washington D.C.
 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 (f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person
Michael F. Morrissey
2. Date of Event Requiring Statement (Month/Day/Year)
11/15/99
3. IRS or Social Security Number of Reporting Person (Voluntary)
4. Issuer Name and Ticker or Trading Symbol
Ferrellgas Partners, L.P. "FGP"
5. Relationship of Reporting Person to Issuer (Check all applicable)
 Director
 Officer (Give title below)
 10% Owner
 Other (specify below)

V.P. Administration

6. If Amendment Date of Original (Month/Year)
7. Individual or Joint/Group Filing (Ceck Applicable)
 Form filed by One Reporting Perons
 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)
Ferrellgas Partners, Common Units
2. Amount of Securities Benefcially Owned (Instr. 4)
0
3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)
D
4. Nature of Indirect Beneficial Ownership (Instr. 5)

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)
0
2. Date Exercisable and Expiration Date (Month/Day/Year)
Date Exercisable
Expiration Date
3. Title and Amount of Underlying Securities (Instr. 3 and 4)
Title
4. Conversion or Exercise Price of Derivative Security (Instr. 5)
5. Ownership Form of Derivative Security: Direct (D) or Indirect
(I)(Instr.4)
D
6. Nature of Indirect Beneficial Ownership (Instr.4)

Explanation of Responses:

Signature of Reporting Person

Date

**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.