FORM 4

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

OMB APPROVAL					
OMB Number:	3235-0287				
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nours per response	e 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 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person * KILPATRICK DAVID B		2. Issuer Name and Ticker or Trading Symbol CHENIERE ENERGY INC [lng]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner							
9105 ST.	CLOUD I	(First) LANE	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/02/2004			-	Officer (give title below) Other (specify below)				elow)		
(Street) BAKERSFIELD, CA 93311		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						
(City))	(State)	(Zip)	Table I - Non-Derivative Securities Acq			Cqui	uired, 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	(Instr. 8)	(on 4. Securities Acquire (A) or Disposed of ((Instr. 3, 4 and 5)		(D)	(D) Beneficially Owned Reported Transaction		Following n(s)	Ownership Form:	Beneficial
				(Monul/Day/Tear	Code	V	Amount	(A) or (D) I	Price	(Instr. 3 and 4) Direct (E or Indirect (I) (Instr. 4)		or Indirect (I)	Ownership (Instr. 4)	
Common	Stock		02/02/2004		A		10,000	A S	0 8	11,000			D	
Reminder: I	Report on a so	eparate line fo	r each class of secur	ities beneficially or	wned direc	Perso conta	ns who	respond this form	n are	not requ		ormation spond unleader	ss	1474 (9-02)
Reminder: I	Report on a so	eparate line fo	Table II - I	Derivative Securit	ies Acquir	Perso conta the fo ed, Dis	ns who ined in rm disp	o respond this form plays a c	n are urren ficiall	not requ ntly valid	ired to res	spond unle	ss	1474 (9-02)
1. Title of	2.	3. Transaction Date (Month/Day/	Table II - I (a) 3A. Deemed Execution Day Year)	Derivative Securit e.g., puts, calls, we 4. te, if Transaction Code Year) (Instr. 8)	ies Acquir arrants, op 5.	Perso contai the fo ed, Dispotions, of 6. Dat and Ex (Mont	ns who ined in rm disp	respond this form plays a c f, or Bene ble securi sable in Date	ficiall ties) 7. Tit Amo Under Secur	not requ ntly valid	OMB cont	spond unle	of 10. Ownersh Form of Derivatir Security Direct (I or Indire	11. Nat of Indir Benefic Owners (Instr. 4

D (O N /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
KILPATRICK DAVID B						
9105 ST. CLOUD LANE	X					
BAKERSFIELD, CA 93311						

Signatures

David B. Kilpatrick	02/09/2004
**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.