

B. INFORMATION ABOUT OFFERING

- | | | |
|---|-------|------------------|
| | Yes | No |
| 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? | [] | [X] |
| Answer also in Appendix, Column 2, if filing under ULOE. | | |
| 2. What is the minimum investment that will be accepted from any individual? | \$ | <u>100,000</u> * |
| * may vary in the discretion of the Managing General Partner. | | |
| | Yes | No |
| 3. Does the offering permit joint ownership of a single unit? | [X] | [] |
| 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. | | |

Full Name (Last name first, if individual)
McMurry, Thomas G.

Business or Residence Address (Number and Street, City, State, Zip Code)
13956 Callebueno Ganar, Jamul, CA, 91935

Name of Associated Broker or Dealer
Crown Capital Securities, LP

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers
 (Check All States or check individual States)..... [] All States

[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
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Full Name (Last name first, if individual)
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Name of Associated Broker or Dealer
Crown Capital Securities, LP

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Full Name (Last name first, if individual)
Arnold, Steve

Business or Residence Address (Number and Street, City, State, Zip Code)
12921 Parkline Drive, Fort Myers, FL 33913

Name of Associated Broker or Dealer
Omni Brokerage

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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

Full Name (Last name first, if individual)
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Business or Residence Address (Number and Street, City, State, Zip Code)
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Name of Associated Broker or Dealer
Omni Brokerage

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers
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Full Name (Last name first, if individual)

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Name of Associated Broker or Dealer

WFP Securities

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual)

Gibson, Mary T.

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Name of Associated Broker or Dealer

Crown Capital Securities, LP

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual)

Distifeno, Gloria A.

Business or Residence Address (Number and Street, City, State, Zip Code)

725 Town and Country road, #530, Orange, CA 92868

Name of Associated Broker or Dealer

Crown Capital Securities

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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Name of Associated Broker or Dealer

Omni Brokerage, Inc.

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual)

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Name of Associated Broker or Dealer

Pacific West Securities

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

Full Name (Last name first, if individual)

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WFP Securities

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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Name of Associated Broker or Dealer

WFP Securities

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Full Name (Last name first, if individual)

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Name of Associated Broker or Dealer

Crown Capital Securities, L.P.

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual)

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AAEC

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual)

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Name of Associated Broker or Dealer

Pacific West Security, Inc.

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual)

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Name of Associated Broker or Dealer

Cullum & Burks Securities, Inc.

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

Full Name (Last name first, if individual)

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Financial Benefits Resources, 21 College Street, Suite 1, South Hadley, MA 01075

Name of Associated Broker or Dealer

Pacific West Securities

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

Full Name (Last name first, if individual)

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Name of Associated Broker or Dealer

Crown Capital Securities

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual)

Finnie, George

Business or Residence Address (Number and Street, City, State, Zip Code)

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Name of Associated Broker or Dealer
Crown Capital Securities

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual)

Filippinnii, Ianian Lucas

Business or Residence Address (Number and Street, City, State, Zip Code)

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Name of Associated Broker or Dealer

Pacific West Securities

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual)

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Name of Associated Broker or Dealer

Empire Securities Corp.

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual)

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Name of Associated Broker or Dealer

Pacific West Securities

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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Full Name (Last name first, if individual)

Broadbent, Joseph

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Name of Associated Broker or Dealer

Omni Brokerage, Inc.

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

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[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

Full Name (Last name first, if individual)

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Name of Associated Broker or Dealer
Crown Capital Securities

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Pacific West Securities

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Full Name (Last name first, if individual)
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Empire Securities Corp.

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Pacific West Financial

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Full Name (Last name first, if individual)
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States in Which Person Listed Has Solicited or Intends to Solicit Purchasers
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[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

Full Name (Last name first, if individual)

Thomas, Jesse

Business or Residence Address (Number and Street, City, State, Zip Code)

JRW Investments, Inc., 3452 E. Foothill Blvd, #200, Pasadena, CA 91107

Name of Associated Broker or Dealer

Omni Brokerage, Inc.

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check All States or check individual States)..... [] All States

[AL]	[AK]	[AZ]	[AR]	<u>[CA]</u>	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [x]* and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt...(Note with attached warrants).....	\$ <u>0</u>	\$ <u>0</u>
Equity.....	\$ <u>0</u>	\$ <u>0</u>
<input type="checkbox"/> Common <input type="checkbox"/> Preferred		
Convertible Securities (including warrants).....	\$ <u>0</u>	\$ <u>0</u>
Partnership Interests.....	\$ <u>10,000,000</u>	\$ <u>5,737,500</u>
Other (Specify _____).....	\$ <u>0</u>	\$ <u>0</u>
Total.....	\$ <u>10,000,000</u>	\$ <u>5,737,500</u>

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors.....	<u>120</u>	\$ <u>5,737,500</u>
____ Non-accredited Investors.....	<u> </u>	\$ <u>0</u>
Total (for filings under Rule 504 only).....	<u>0</u>	\$ <u>0</u>

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.

Type of offering	Type of Security	Dollar Amount Sold
Rule 505.....	<u>0</u>	\$ <u>0</u>
Regulation A.....	<u>0</u>	\$ <u>0</u>
Rule 504.....	<u>0</u>	\$ <u>0</u>
Total.....	<u>0</u>	\$ <u>0</u>

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.*

Transfer Agent's Fees.....	<input type="checkbox"/>	\$ <u>0</u>
Printing and Engraving Costs.....	<input type="checkbox"/>	\$ <u>0</u>
Legal Fees.....	<input type="checkbox"/>	\$ <u>0</u>
Accounting Fees.....	<input type="checkbox"/>	\$ <u>0</u>
Engineering Fees.....	<input type="checkbox"/>	\$ <u>0</u>
Sales Commissions (specify finders' fees separately).....	<input type="checkbox"/>	\$ <u>0</u>
Other Expenses (identify).....Travel.....	<input type="checkbox"/>	\$ <u>0</u>
Total.....	<input type="checkbox"/>	\$ <u>0</u>

* The Managing Partner has paid and will pay all expenses incurred in connection with the Offering.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." **\$ 10,000,000**

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees.....	[] \$ <u>0</u>	[] \$ <u>0</u>
Purchase of real estate.....	[] \$ <u>0</u>	[] \$ <u>0</u>
Purchase, rental or leasing and installation of machinery and equipment.....	[] \$ <u>0</u>	[] \$ <u>0</u>
Construction or leasing of plant buildings and facilities.....	[] \$ <u>0</u>	[] \$ <u>0</u>
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger).....	[] \$ <u>0</u>	[] \$ <u>0</u>
Repayment of indebtedness.....	[] \$ <u>0</u>	[] \$ <u>0</u>
Working capital.....	[] \$ <u>10,000,000</u>	[] \$ <u>0</u>
Other (specify):		
.....	[] \$ <u>0</u>	[] \$ <u>0</u>
Column Totals.....	[] \$ <u>10,000,000</u>	[] \$ <u>0</u>
Total Payments Listed (column totals added).....	[] \$ <u>10,000,000</u>	

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) Texas Keystone 2004 Natural Gas Limited Partnership I	Signature 	Date: 1/5/05
Name of Signer (Print or Type) Robert F. Kozel	Title of Signer (Print or Type) President, Texas Keystone, Inc., Managing General Partner	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violation. (See 18 U.S.C. 1001.)

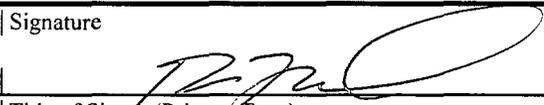
E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? [] Yes [X] No

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) Texas Keystone 2004 Natural Gas Limited Partnership I	Signature 	Date: 1/5/05
Name of Signer (Print or Type) Robert F. Kozel	Title of Signer (Print or Type) President, Texas Keystone, Inc., Managing General Partner	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1 State	2 Intend to sell to nonaccredited investors in State (Part B-Item 1)		3 Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
	Yes	No		\$10,000,000 of Class A Units of Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes
AL									
AK									
AZ		X	\$81,500	3	\$81,500	0	\$0		X
AR									
CA		X	\$1,646,000	49	\$1,646,000	0	\$0		X
CO		X	\$600,000	3	\$600,000	0	\$0		X
CT									
DE									
DC									
FL		X	\$100,000	2	\$100,000	0	\$0		X
GA									
HI									
ID									
IL		X	\$50,000	1	\$50,000	0	\$0		X
IN		X	\$212,500	11	\$212,500	0	\$0		X
IA									
KS		X	\$805,000	10	\$805,000	0	\$0		X
KY									
LA									
ME									
MD									
MA		X	\$50,000	3	\$50,000	0	\$0		X
MI		X	\$25,000	1	\$25,000	0	\$0		X
MN		X	\$50,000	1	\$50,000	0	\$0		X
MS									
MO		X	\$665,000	6	\$665,000	0	\$0		X
MT									
NE									
NV		X	\$25,000	1	\$25,000	0	\$0		X
NH									
NJ		X	\$105,000	3	\$105,000	0	\$0		X
NM									
NY		X	\$250,000	5	\$250,000	0	\$0		X
NC		X	\$100,000	1	\$100,000	0	\$0		X
ND									
OH		X	\$60,000	1	\$60,000	0	\$0		X
OK		X	\$25,000	1	\$25,000	0	\$0		X
OR		X	\$97,500	3	\$97,500	0	0		X
PA		X	\$135,000	3	\$135,000	0	0		X
RI									

1	2		3	4				5	
	Intend to sell to nonaccredited investors in State (Part B-Item 1)			Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)
State	Yes	No	\$10,000,000 of Class A Units of Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
SC		X	\$50,000	1	\$50,000	0	\$0		X
SD									
TN									
TX		X	\$275,000	4	\$275,000	0	\$0		X
UT		X	\$25,000	1	\$25,000	0	\$0		X
VT		X	\$20,000	1	\$20,000	0	\$0		X
VA		X	\$250,000	3	\$250,000	0	\$0		X
WA		X	\$25,000	1	\$25,000	0	\$0		X
WV									
WI		X	\$10,000	1	\$10,000	0	\$0		X
WY									
PR									