FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL											
	OMB Number:		3235-028									
-1	l –											

37 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)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Amo or Nun of Title Sha		er							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	on Date,	4. Transa Code (8)				6. Date Exerc Expiration Da (Month/Day/\)		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Der Sec (Ins	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: ct (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
		Ta	able II -								osed of, convertib				wned						
Common Units 12/18/20					2006	006			S	s 1,84		D	\$2	\$22.72		2,851,373					
Common Units 12/18/20				2006	006			S		921 ⁽⁴⁾ D \$		\$22	\$22.5884		2,853,216 ⁽⁵⁾)				
Common Units 12/15/20					2006	006			S		1,843 D \$23		3.1172	1172 2,854,137		D					
Common Units 12/15/20					2006	006			S		922(3)	D	\$	\$23.1		2,855,980		,			
Common Units 12/15/20						006			S		921(1)	D	\$2	\$23.03		56,902 ⁽²⁾	D)			
					Code	v	Amount	(A) or Price		e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)						
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/						Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			and 5) Secu Bene Own		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
		Tab	le I - N	on-Deriv	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or E	Benefi	cially	Owne	ed					
(City)	(St	ate)	(Zip)																		
(Street) MURRAY HILL NJ 07974															X Form filed by One Reporting Person Form filed by More than One Reporting Person						
ROOM 7D-523					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
Trust (Last) (First) (Middle) 600 MOUNTAIN AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 12/15/2006										-,					
															Offic	er (give title		Other below)	(specify		
Lucent Technologies Inc. Master Pension					DC	DORCHESTER MINERALS LP [DMLP]									(Check all applicable) Director X 10% Own						
1. Name and Address of Reporting Person*					2. Is	Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer						

Explanation of Responses:

- 1. Reporting person was actually allocated 921.5 common units at \$23.03 (out of total 3686 common units sold in three transactions on 12/15/06 as reported herein)
- 2. After allocation in footnote 1, common units owned by the Reporting Person would have been 2,856,901.5
- 3. Reporting person was actually allocated 921.5 common units at \$23.10 (out of total 3686 common units sold in three transactions on 12/15/06 as reported herein)
- 4. Reporting person was actually allocated 921.3333 common units at \$22.5884 (out of total 2764 common units sold in two transactions on 12/18/06 as reported herein)
- $5.\ After allocation\ in\ footnote\ 4,\ common\ units\ owned\ by\ the\ Reporting\ Person\ would\ have\ been\ 2,853,215.6667$
- 6. Reporting person was actually allocated 1842.6667 common units at \$22.72 (out of total 2764 common units sold in two transactions on 12/18/06 as reported herein)

12/19/2006 Eli Krupnik, Atty in Fact ** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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.

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 Number.