

PARKS S E
Form 4
November 12, 2002

FORM 4

UNITED STATES SECURITIES AND
EXCHANGE COMMISSION
Washington, DC 20549

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

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- o Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol			6. Relationship of Reporter to Issuer (Check all applicable)				
Parks, S. E.			Questar Corporation - STR			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below)				
(Last) (First) (Middle) 180 East 100 South, P.O. Box 45433			3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)			4. Statement for Month/Day/Year November 7, 2002				
(Street)						5. If Amendment, Date of Original (Month/Day/Year)				
Salt Lake City, Utah 84145-0433						Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)			Table I Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							
1. Title of Security (Instr. 3)			2. Transaction Date	2A. Deemed Execution	3. Transaction Code	4. Securities Acquired (A) or Disposed of (D)		5. Amount of Securities Owned		6. Ownership Form:

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	(Month/ Day/ Year)	Date, if any (Month/ Day/ Year)	(Instr.8)		(Instr. 3, 4 and 5)			Beneficial Owned (D) or Followed Reported Transaction(s) (Instr. 4) (Instr. 3 and 4)	Indirect (D)
			Code	V	Amount	(A) or (D)	Price		
Common Stock (and attached Common Stock Purchase Rights)								77,332	D
Common Stock (and attached Common Stock Purchase Rights)								20,598	I5004 1

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).

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.

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(9-02)

FORM 4 (continued)		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. Con- version or Exercise Price of Deri- vative Security	3. Trans- action Date (Month/ Day/ Year)	3A. Deemed Execution Date, if any (Month/ Day/ Year)	4. Trans- action Code (Instr.8)	5. Number of Deriv- ative Securities Ac- quired (A) or Dis- posed of (D) (Instr. 3, 4 and 5)	6. Date Exer- cisable and Expiration Date (Month/Day/ Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Deriv- ative Secur- ity (Instr. 5)

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				Code	V	(A)	(D)	Date Exer-cisable	Expira-tion Date	Title	Amount or Number of Shares
Stock Option											
Phantom Stock Units	1-1	11-07-2002		A		4.2353					\$25.50

Explanation of Responses:

- 1 These equivalent shares are in my account in Questar's Employee Investment Plan as of November 7, 2002.
- 2 These numbers include vested options only. Detailed information concerning my options has been previously disclosed.
- 3 I receive phantom stock units as a result of my participation in an excess benefit plan sponsored by Questar. This total includes the 1,340.6156 phantom stock units in such plan in addition to the phantom stock units held through my account in a deferred compensation plan.

/s/ S. E. Parks

November 8, 2002

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations.

S. E. Parks

Date

See

**Signature of Reporting Person

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.