STANLEY CHARLES B

Form 4/A

February 07, 2005

FORM 4

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

OMB APPROVAL

Form 4 or
Form 5
obligations

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

burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

may continue. *See* Instruction

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

1(b).

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person *

STANLEY	CHARLES B	, 1 0 10011 _	Symbol	ΓAR COR			mg	Issuer	or reporting r	
(Last) 180 EAST	(First) 100 SOUTH	(Middle)		of Earliest To Day/Year) 2005	ransaction			Director X Officer (gi below)		0% Owner Other (specify
SALT LAK	(Street)	111		endment, Da nth/Day/Yea 2005	_	al		6. Individual or Applicable Line) _X_ Form filed by Form filed by Person	_	Person
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secu	rities Acc	quired, Disposed	of, or Benefic	ially Owned
1.Title of Security (Instr. 3) Common Stock and attached Common Stock	2. Transaction Dat (Month/Day/Year) 02/01/2005		Date, if	3. Transactic Code (Instr. 8)	(Instr. 3,	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Purchase Rights Common Stock and attached Common								2,347.8801 (2)	I	Employee Investment Plan

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Purchase Rights

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

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SEC 1474

(9-02)

8. Price of Derivative Security (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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title and 2. Underlying 9 (Instr. 3 and	Securities	3 3 4
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Common Stock and attached Common Stock Purchase Rights	\$ 0					<u>(3)</u>	(3)	Common Stock and attached Common Stock Purchase Rights	0	
Phantom Stock Units	\$ 0					<u>(4)</u>	<u>(4)</u>	Phantom Stock Units	0	

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
STANLEY CHARLES B			Executive				
180 EAST 100 SOUTH			Vice				
SALT LAKE CITY, UT 84111			President				

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Signatures

Connie C. Holbrook Attorney in Fact for C.B. Stanley

02/07/2005

**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).
- (1) I received a distribution of formerly restricted shares of stock and made an advance election to satisfy my tax payment obligations by selling shares to Questar.
- (2) As of February 1, 2005, I have 2,347.8801 equivalent shares of stock in Questar's Employee Investment Plan. The number of equivalent shares will fluctuate as Questar's stock price changes; this fluctuation does not reflect any transactions that should be reported.
- (3) The question about dates is irrelevant since I am not reporting any changes in my stock options.
- (4) This date has not been filled in since I am not reporting any changes in my phantom stock units.
- I receive phantom stock units as a result of my participation in an excess benefit plan. This total includes 3,342.6230 units in such plan in addition to units held through my account balance in deferred compensation plans. This total also reflects a December 22nd and year end rounding allocation to such excess benefit plan.

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.

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