PARKS S E Form 4 December 18, 2002

FORM 4

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

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 OMB APPROVAL

OMB

Number: 3235-0287 Expires: January 31,

2005

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(Print or Type Responses)

(Print or Ty	rpe Responses)						_		
1. Name and Address of Reporting Person* Parks, S. E.			2. Issuer Na	ame and Ticl	6. Relationship of Report to Issuer (Check all app				
				Questar Co		Directdi0% Owner			
								Office Other (specify (give below) title below)	
								Senior Vice President and Chief Financial	
(Last)	(First)	(Middle)	3. I.R.S. Identification Number of 4. Statement for Month/Day/Year						
180 East 100 South, P.O. Box 45433 (Street)			Reporting (voluntar	g Person, if any	n entity	December 16, 2002	7. Individual or Joint/Gro (Check Applicable Line)		
						5. If Amendment, Date of	Form filed by One R Person		
			Original (Month/Day/Year					Form filed by More Reporting Person	
Salt Lake (City, Utah 84145-04	33							
(City)	(State)	Table I Non-Derivative Securities Acquired, l					osed of, or Beneficially		
1. Title of Security (Instr. 3)			2. Trans- action Deemed action Date Execution Code				1 5. Amoundwner- of ship Securitivesm:		

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		Date, if	(Instr.8)		(Instr. 3, 4 and 5)			Benefi Dialdy t	
	(Month/ Day/ Year)	any (Month/ Day/ Year)	Code	V	Amount	(A) or (D)	Price	Fol Re _l	ned(D) or lowlimgirect port(A) insaction(s) (Instr. 4) str.
Common Stock (and attached Common Stock Purchase Rights)								77,33	2D
Common Stock (and attached Common Stock Purchase Rights)								20,58	61 9428

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

Persons who
respond to the SEC 1474
collection of (9-02)
information
contained
in this form are not
required to respond
unless the form
displays
a currently valid
OMB control
number.

FORM 4 (continued)	Table II Derivative Securities Acquired, Disposed of, or Beneficially O (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/	4. Transaction Code (Instr.8)	5. Number of Derivative Securities Acquired (A) or Disposed of	6. Date Exercisable 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)	

^{*} If the form is filed by more than one reporting person, see Instruction 4(b)(v).

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			Year)			(D) (Instr. 3, 4 and 5)						
				Code	V	(A)	(D)	Date Exer- cisable	Expira- tion Date	Title	Amount or Number of Shares	
Stock Option												
Phantom Stock Units	1-1	12-16-2002		A		9.0267						\$28.10

Explanation of Responses:

- 1 These equivalent shares are in my account in Questar's Employee Investment Plan as of December 6, 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 1,420.5963 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	December 17, 2002
** Intentional misstatements or omissions of facts constitute Federal Criminal Violations.	S. E. Parks	Date
See		
18 U.S.C. 1001 and 15 U.S.C. 78ff(a).	**Signature of Reporting Person	

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.