QUESTAR CORP

Form 4

December 08, 2004

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

OMB APPROVAL

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obligations

may continue.

See Instruction

Check this box

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(h) of the Investment Company Act of 1940

1(b).

Common Stock

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading **HOLBROOK CONNIE C** Issuer Symbol QUESTAR CORP [STR] (Check all applicable) (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) Director 10% Owner Other (specify _X__ Officer (give title 180 EAST 100 SOUTH 12/07/2004 below) Sr. VP, Gen. Counsel, Corp Sec (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting SALT LAKE CITY, UT 84111 Person

(City)	(State)	(Zip) Tabl	e I - Non-D	erivative	Secur	rities A	cquired, Disposed	of, or Benefici	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code Disposed of (D)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Stock and attached Common Stock Purchase Rights	12/07/2004		M	100	A	\$ 15	136,469 (1)	D	
Common Stock and attached							30,029.2285 (<u>2</u>)	I	Employee Investment Plan

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)

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. Number of torDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amour Number Shares
Common Stock and attached Common Stock Purchase Rights	\$ 48.09	12/07/2004		M		100	08/08/2003	02/08/2010	Common Stock and attached Common Stock Purchase Rights	10
Phantom Stock Units	\$ 48.09	12/07/2004		A	16.9058		(3)	<u>(3)</u>	Phantom Stock Units	16.90

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

HOLBROOK CONNIE C 180 EAST 100 SOUTH SALT LAKE CITY, UT 84111

Sr. VP, Gen. Counsel, Corp Sec

Signatures

Connie C. Holbrook

**Signature of Date

Reporting Person

Reporting Owners 2

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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) This total reflects gifts of stock for 400 shares made on a voluntary disclosure basis on December 6, 2004.
 - As of December 6, 2004, I have 30,029.2285 equivalent shares of stock in my account in Questar's Employee Investment Plan. The
- (2) number of equivalent shares will fluctuate as Questar's stock price changes; this fluctuation does not reflect any transactions that should be reported.
- (3) Phantom stock units will be converted to cash beginning at retirement; my retirement date is unknown.
 - I receive phantom stock units as a result of my participation in an excess benefit plan. This total includes 3,204.6728 units in such plan in
- (4) addition to units held through my account balance in deferred compensation plans. This total also reflects an November 22nd 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.