

STANLEY CHARLES B
 Form 4
 December 17, 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)			
Stanley, Charles B.			Questar Corporation - STR			<input checked="" type="checkbox"/>	Director	10% Owner	
						<input checked="" type="checkbox"/>	Officer	Other (specify below)	
7. Individual or Joint/Gro (Check Applicable Line)			Executive Vice Pr						
(Last)	(First)	(Middle)	3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)			4. Statement for Month/Day/Year			
180 East 100 South, P.O. Box 45601						December 16, 2002			
(Street)			5. If Amendment, Date of Original (Month/Day/Year)			Form filed by One R Person			
Salt Lake City, Utah 84145-0601						Form filed by More t Reporting Person			
(City)	(State)	(Zip)	Table I Non-Derivative Securities Acquired, Disposed of, or Beneficially						
1. Title of Security (Instr. 3)			2. Trans- action Date	2A. Deemed Execution Date, if	3. Trans- action Code (Instr.8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amou of Securities Beneficially	6. Owner- ship Form: Direct

	(Month/Day/Year)	any (Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	Owned (D) or Followed (D) Reported Transaction(s) (Instr. 4) (Instr. 3 and 4)
Common Stock (and attached Common Stock Purchase Rights)								21,000D
Common Stock (and attached Common Stock Purchase Rights)								803.87B1

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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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. 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 Derivative 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 of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (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	12-16-2002		A		.0331					\$28.10

Explanation of Responses:

- 1 These equivalent shares are allocated to 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 12.3307 phantom stock units in such plan in addition to the phantom stock units held through my account in a deferred compensation plan.

/s/ Connie C. Holbrook

December
17, 2002

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

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

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.