Edgar Filing: Wagstaff Craig C. - Form 4

Form 4	C										
September 07, 2012 FORM 4 UNITED STATES S Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). FORM 4 DIVITED STATES S STATEMENT OF C Filed pursuant to Sec Section 17(a) of the Pur 30(h) of				shington NGES IN SECUI .6(a) of th	, D.C. 20 BENEF RITIES ne Securi ding Con)549 TICLA ties H npan	AL OW Exchang y Act o	NERSHIP OF e Act of 1934, f 1935 or Sectio	Number:3235-0287Number:January 31, 2005Expires:2005Estimated average burden hours per response0.5		
(Print or Type		Person *	2 Janua	e Nomo on	d Tielton of	Tradi	in a	5 Relationshin o	f Reporting P	erson(s) to	
1. Name and Address of Reporting Person <u>*</u> Wagstaff Craig C.			2. Issuer Name and Ticker or Trading Symbol QUESTAR CORP [STR]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 180 E 100 S, P.O. BOX 45360			3. Date of Earliest Transaction (Month/Day/Year) 09/05/2012					Director 10% Owner X Officer (give title Other (specify below) below) EVP and COO			
SALT LAK	4. If Amendment, Date Original Filed(Month/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 					
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secu	rities Acc	uired, Disposed o	of, or Benefici	ially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	Code (Instr. 8)	4. Securit on(A) or Di (Instr. 3, Amount	spose 4 and (A) or	d of (D) 5)	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)	
Common Stock	09/05/2012			F	Amount 1,723	(D) D	Price \$ 19.78	34,116 <u>(1)</u>	D		
Common Stock								9,627.98 <u>(2)</u>	I	Employee Investment Plan	

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

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.

Edgar Filing: Wagstaff Craig C. - Form 4

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. Transacti Code (Instr. 8)	5. oriNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	7. Title and Underlying ((Instr. 3 and	Securities	8. Pri Deriv Secu (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	\$ 0					(3)	(3)	Phantom Stock Units	5,073.4018	

Reporting Owners

Reporting Owner Name / Address	Relationships							
FB	Director	10% Owner	Officer	Other				
Wagstaff Craig C. 180 E 100 S, P.O. BOX 45360 SALT LAKE CITY, UT 84145-0433	;		EVP and COO					
Signatures								
Julie A. Wray, Attorney in Fact	09/07/201	2						
**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). **
- I received a distribution of formerly restricted shares of stock and made an advance election to satisfy my tax payment obligations by (1) selling shares to Questar.
- As of September 5, 2012, I have 9627.98 equivalent shares of stock in Questar's Employee Investment Plan. The number of equivalent (2)shares will fluctuate as Questar's stock price changes; this fluctuation does not reflect any transactions that should be reported.
- Phantom stock units will be converted to cash per my elections on or within 5 years of my termination of employment (subject to (3) 6-month delay if necessary to comply with IRC 409A), or upon my death or Disability.

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.