

HOLBROOK CONNIE C
 Form 4
 February 10, 2003

FORM 4

UNITED STATES SECURITIES AND
 EXCHANGE COMMISSION
 Washington, DC 20549

OMB
 APPROVAL
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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).

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

(Print or Type Responses)

1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol			6. Relationship of Reporting to Issuer (Check all applicable)			
Holbrook, Connie C.			Questar Corporation - STR			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below)			
(Last) (First) (Middle) 180 East 100 South, P.O. Box 45433			3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)			4. Statement for Month/Day/Year February 7, 2003			
(Street) Salt Lake City, Utah 84145-0433			5. If Amendment, Date of Original (Month/Day/Year)			7. Individual or Joint/Group (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (State) (Zip)			Table I Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned						
1. Title of Security (Instr. 3)			2. Transaction Date	2A. Deemed Execution Date, if	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct	7. Indicate if

	(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)	Owned (D) or Followed (D) Reported Transaction(s) (Instr. 4) (Instr. 3 and 4)
Common Stock (and attached Common Stock Purchase Rights)							98,955	D
Common Stock (and attached Common Stock Purchase Rights)							28,538	D 18077 ¹

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).

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SEC 1474 (9-02)

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)	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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				(Instr. 3, 4 and 5)		Date Exer-cisable	Expira-tion Date	Title	Amount or Number of Shares
				Code	V				
Stock Option									
Phantom Stock Units	1-1	02-07-2003		A		14.9724			\$27.15

Explanation of Responses:

- 1 These equivalent shares are in my account in Questar's Employee Investment Plan as of February 7, 2003.
- 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 2,187.4101 phantom stock units in such plan in addition to the phantom stock units held through my account balances in deferred compensation plans.

/s/ Connie C. Holbrook

February 10, 2003

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

Connie C. Holbrook

Date

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.