

CIPRICH PAULA M  
Form 3  
January 07, 2005

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person * ^ CIPRICH PAULA M (Last) (First) (Middle)			2. Date of Event Requiring Statement (Month/Day/Year) 01/01/2005		3. Issuer Name and Ticker or Trading Symbol NATIONAL FUEL GAS CO [NFG]	
6363 MAIN STREET (Street)					4. Relationship of Reporting Person(s) to Issuer  (Check all applicable)  <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) General Counsel, NFG Co.	
WILLIAMSVILLE, NY 14221 (City) (State) (Zip)					5. If Amendment, Date Original Filed(Month/Day/Year)	
					6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	3,134	D	^
Common Stock	3,861	I	401(k) Plan Trust

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

SEC 1473 (7-02)

**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.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Employee stock option (right to buy)	09/26/1997	09/26/2006	Common stock	3,500	\$ 18.4062	D	Â
Employee stock option (right to buy)	04/04/1998	04/04/2007	Common stock	4,804	\$ 20.8125	D	Â
Employee stock option (right to buy)	12/11/1998	12/12/2007	Common stock	20,000	\$ 22.4375	D	Â
Employee stock option (right to buy)	12/10/1999	12/10/2008	Common stock	4,340	\$ 23.0312	D	Â
Employee stock option (right to buy)	12/10/1999	12/11/2008	Common stock	15,660	\$ 23.0312	D	Â
Employee stock option (right to buy)	02/17/2001	02/17/2010	Common stock	4,688	\$ 21.3281	D	Â
Employee stock option (right to buy)	02/17/2001	02/18/2010	Common stock	7,312	\$ 21.3281	D	Â
Employee stock option (right to buy)	12/07/2001	12/08/2010	Common stock	25,000	\$ 27.7975	D	Â
Employee stock option (right to buy)	03/14/2003	03/15/2012	Common stock	9,251	\$ 24.495	D	Â
Employee stock option (right to buy)	03/14/2003	03/14/2012	Common stock	4,082	\$ 24.495	D	Â
Employee stock option (right to buy)	03/14/2003	03/15/2012	Common stock	26,667	\$ 24.495	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
CIPRICH PAULA M 6363 MAIN STREET WILLIAMSVILLE, NY 14221	Â	Â	Â	General Counsel, NFG Co. Â

## Signatures

James R. Peterson, Attorney  
in Fact

01/07/2005

\*\*Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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).

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**Remarks:**

Exhibit^ List^ -^ Exhibit^ 24^ -^ Power^ of^ Attorney

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.