

HARMON JAMES A
 Form 4
 December 03, 2002

FORM 4

UNITED STATES SECURITIES AND
 EXCHANGE COMMISSION
 Washington, DC 20549

OMB
 APPROVAL
 OMB
 Number: 3235-0287
 Expires: January 31,
 2005
 Estimated average
 burden
 hours per
 response 0.5

- 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* <p style="text-align: center; color: blue;">Harmon, James A.</p>			2. Issuer Name and Ticker or Trading Symbol <p style="text-align: center; color: blue;">Questar Corporation - STR</p>				6. Relationship of Reporting Person to Issuer (Check all applicable) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 15%;">Director</td> <td style="width: 80%;">10% Owner</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>Officer (give title below)</td> <td>Other (specify below)</td> </tr> </table> <p style="text-align: right; color: blue;">Director</p>			<input checked="" type="checkbox"/>	Director	10% Owner	<input type="checkbox"/>	Officer (give title below)	Other (specify below)													
<input checked="" type="checkbox"/>	Director	10% Owner																										
<input type="checkbox"/>	Officer (give title below)	Other (specify below)																										
<table style="width: 100%;"> <tr> <td style="width: 33%;">(Last)</td> <td style="width: 33%;">(First)</td> <td style="width: 33%;">(Middle)</td> </tr> <tr> <td colspan="3" style="text-align: center; color: blue;">Harmon & Co. LLC</td> </tr> <tr> <td colspan="3" style="text-align: center; color: blue;">888 Seventh Avenue, 37th Floor</td> </tr> <tr> <td colspan="3" style="text-align: center;">(Street)</td> </tr> <tr> <td colspan="3" style="text-align: center; color: blue;">New York, New York 10019</td> </tr> <tr> <td style="text-align: center;">(City)</td> <td style="text-align: center;">(State)</td> <td style="text-align: center;">(Zip)</td> </tr> </table>	(Last)	(First)	(Middle)	Harmon & Co. LLC			888 Seventh Avenue, 37th Floor			(Street)			New York, New York 10019			(City)	(State)	(Zip)	3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)	4. Statement for Month/Day/Year <p style="color: blue;">December 2, 2002</p>	5. If Amendment, Date of Original (Month/Day/Year)	7. Individual or Joint/Gross (Check Applicable Line) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;"><input type="checkbox"/></td> <td style="width: 15%;">Form filed by One Reporting Person</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>Form filed by More than One Reporting Person</td> </tr> </table>			<input type="checkbox"/>	Form filed by One Reporting Person	<input type="checkbox"/>	Form filed by More than One Reporting Person
(Last)	(First)	(Middle)																										
Harmon & Co. LLC																												
888 Seventh Avenue, 37th Floor																												
(Street)																												
New York, New York 10019																												
(City)	(State)	(Zip)																										
<input type="checkbox"/>	Form filed by One Reporting Person																											
<input type="checkbox"/>	Form filed by More than One Reporting Person																											
Table I Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																												
1. Title of Security (Instr. 3)	2. Transaction Date (Month/	2A. Deemed Execution Date, if any	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 (D) or																						
			Code	V	Amount	Price																						

	Day/ Year)	(Month/ Day/ Year)				(A) or (D)		Followed Indirect Reported Transaction(s) (Instr. 4) (Instr. 3 and 4)
Common Stock (and attached Common Stock Purchase Rights)								80,528

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).

								SEC 1474 (9-02)
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.								

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)	
				Code	V		(A)	(D)			Date Exercisable

Edgar Filing: HARMON JAMES A - Form 4

Stock Option												
Phantom Stock Units	1-1	12-02-2002		A	65.2090							\$26.07

Explanation of Responses:

1

I defer my director's fees and these fees are accounted for in phantom stock units. I also receive "dividends."

/s/ Connie C. Holbrook

December 3, 2002

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

Connie C. Holbrook as Attorney in Fact
for James A. Harmon

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.