

GARRISON U EDWIN  
 Form 4  
 March 19, 2003

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*<br><br><p style="text-align: center; color: blue;">Garrison, U. Edwin</p> |                          |           | 2. Issuer Name <b>and</b> Ticker or Trading Symbol<br><br><p style="text-align: center; color: blue;">Questar Corporation - STR</p> |                                   |  | 6. Relationship of Reporter to Issuer<br>(Check all applicable)<br><table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; text-align: center;">Director</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/></td> <td style="width: 10%; text-align: center;">10% Owner</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/></td> <td style="width: 10%; text-align: center;">Officer</td> <td style="width: 10%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 10%; text-align: center;">Other (specify below)</td> <td style="width: 10%;"></td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2" style="text-align: center;">(give title below)</td> <td colspan="2"></td> </tr> </table> <p style="text-align: right; color: blue;">Senior Director</p> |  |   | Director                      | <input type="checkbox"/> | 10% Owner | <input type="checkbox"/> | Officer | <input checked="" type="checkbox"/> | Other (specify below) |  |  |  |  |  | (give title below) |  |  |  |
| Director   | <input type="checkbox"/> | 10% Owner | <input type="checkbox"/>  | Officer                           | <input checked="" type="checkbox"/>  | Other (specify below)   |  |   |                               |                          |           |                          |         |                                     |                       |  |  |  |  |  |                    |  |  |  |
|  |                          |           |   | (give title below)                |  |   |  |   |                               |                          |           |                          |         |                                     |                       |  |  |  |  |  |                    |  |  |  |
| (Last)   | (First)                  | (Middle)  | 3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)   |                                   | 4. Statement for Month/Day/Year<br><br><p style="color: blue;">March 17, 2003</p>      |   | 7. Individual or Joint/Gross (Check Applicable Line) |   |                               |                          |           |                          |         |                                     |                       |  |  |  |  |  |                    |  |  |  |
| 4236 Skyline Drive<br><br>(Street)<br><br><p style="color: blue;">Ogden, Utah 84403</p>                            |                          |           | 5. If Amendment, Date of Original (Month/Day/Year)  |                                   | Form filed by One Reporting Person<br><br>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 (Month/Day/Year)  | 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 (D) or | Ownership Form: Direct (D) or |                          |           |                          |         |                                     |                       |  |  |  |  |  |                    |  |  |  |

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|  | Day/<br>Year) | (Month/<br>Day/<br>Year) | Code | V | Amount | (A)<br>or<br>(D) | Price | Following<br>Reported<br>Transaction(s)<br>(Instr. 4)<br>(Instr.<br>3 and<br>4) | Indirect<br>(I)<br>Transaction(s)<br>(Instr. 4) |
|--|---------------|--------------------------|------|---|--------|------------------|-------|---|---|
| Common Stock (and attached Common Stock Purchase Rights) |               |                          |      |   |        |                  |       | 48,074  | D   |

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.

SEC 1474  
(9-02)

| FORM 4<br>(continued)                               | Table II Derivative Securities Acquired, Disposed of, or Beneficially Owned<br>(e.g., puts, calls, warrants, options, convertible securities) |   |   |  |   |  |     |  |                         |  |   |
|---|---|---|---|--|---|--|-----|--|-------------------------|--|---|
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2. Con-<br>version or<br>Exercise<br>Price of<br>Deri-<br>vative<br>Security  | 3. Trans-<br>action<br>Date<br><br>(Month/<br>Day/<br>Year) | 3A.<br>Deemed<br>Execution<br>Date, if<br>any<br><br>(Month/<br>Day/<br>Year) | 4. Trans-<br>action<br>Code<br>(Instr.8) |   | 5. Number of<br>Deriv-<br>ative<br>Securities<br>Ac-<br>quired (A)<br>or Dis-<br>posed of<br>(D)<br>(Instr. 3, 4<br>and 5) |     | 6. Date Exer-<br>cisable and<br>Expiration<br>Date<br>(Month/Day/<br>Year) |                         | 7. Title and<br>Amount of<br>Underlying<br>Securities<br>(Instr. 3 and<br>4) | 8. Price<br>of<br>Deriv-<br>ative<br>Secu-<br>rity<br>(Instr.<br>5) |
|   |   |   |   | Code                                     | V | (A)  | (D) | Date<br>Exer-<br>cisable   | Expira-<br>tion<br>Date |  |   |
| Stock<br>Option                                     |   |   |   |  |   |  |     |  |                         |  |   |

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|                     |     |            |  |   |         |  |  |  |  |  |  |         |
|---------------------|-----|------------|--|---|---------|--|--|--|--|--|--|---------|
| Phantom Stock Units | 1-1 | 03-17-2003 |  | A | 19.9722 |  |  |  |  |  |  | \$28.90 |
|---------------------|-----|------------|--|---|---------|--|--|--|--|--|--|---------|

Explanation of Responses:

1 I have an account balance of phantom stock units under a deferred compensation plan. These units are credited with "reinvested dividends." These shares will be converted to cash upon my death or retirement as a director of a Questar subsidiary.

|    |   |  |                       |
|----|---|--|-----------------------|
| ** | Intentional misstatements or omissions of facts constitute Federal Criminal Violations. | <u>/s/ Connie C. Holbrook</u>                                | <u>March 18, 2003</u> |
|    |   | Connie C. Holbrook as Attorney in Fact for U. Edwin Garrison | Date                  |

*See 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.

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