Jibson Ron W Form 4/A October 09, 2009

FORM 4

OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

Expires: January 31, 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

Common

(Print or Type Responses)

1. Name and A Jibson Ron	Symbol	2. Issuer Name and Ticker or Trading Symbol QUESTAR CORP [STR]			5. Relationship of Reporting Person(s) to Issuer				
(Last)	, , ,	fiddle) 3. Date of (Month/	of Earliest T Day/Year)	-	Director		0% Owner		
180 EAST 45360	BOX 09/14/2	2009		below)	_X_ Officer (give title Other (specify below) Senior Vice President				
SALT LAK	(Street) KE CITY, UT 8414	Filed(Mo 09/16/2	4. If Amendment, Date Original Filed(Month/Day/Year) 09/16/2009			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	ole I - Non-l	Derivative Securities	Acquired, Disposed	d of, or Benefic	ially Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code	4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		

Stock

 $\begin{array}{c} \text{Common} \\ \text{Stock} \end{array} \qquad \begin{array}{c} \text{I1,092.5927} \\ \text{\underbrace{(1)}} \end{array} \qquad \begin{array}{c} \text{Employee} \\ \text{Investment} \\ \text{Plan} \end{array}$

or

Code V Amount (D) Price

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.

SEC 1474

(9-02)

(Instr. 3 and 4)

D

11,423

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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 orderivative 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)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Phantom Stock Units	\$ 35.25	09/14/2009		A	198.2541		(2)	(2)	Phantom Stock Units	198.25
Stock Option	\$ 35.38						(3)	03/05/2016	Common Stock	25,00

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Jibson Ron W 180 EAST 100 SOUTH P.O. BOX 45360 SALT LAKE CITY, UT 84145-0433

Senior Vice President

Signatures

Abigail L. Jones Attorney in Fact for R. W. Jibson

10/08/2009

**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).
- (1) As of September 16, 2009, I have 11,092.5927 equivalent shares of stock in Questar's Employee Investment Plan. The number of equivalent 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 6-month delay if necessary to comply with IRC 409A), or upon my death or Disability.
- (3) The option vests in three annual installments beginning on March 5, 2010.

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.

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