CHASTAIN PAUL R

Reminder: Report on a separate line for each class of

securities beneficially owned directly or indirectly.

Form 5

February 14, 2005

February 14, 2005										
FORM 5									OMB A	PPROVAL
Check this box if	STATES S	S SECURITIES AND EXCHANGE COMMISSION Workington, D.C. 20540						OMB Number:	3235-0362	
no longer subject			Washington, D.C. 20549						Expires:	January 31, 2005
to Section 16. Form 4 or Form 5 obligations may continue. See Instruction		CATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated average burden hours per response		
1(b).	1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported Form 4 Transactions Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1940 Transactions									
1. Name and Address CHASTAIN PAU		2. Issuer Name and Ticker or Trading Symbol NORTH AMERICAN GALVANIZING & COATINGS					5. Relationship of Reporting Person(s) to Issuer			
	((Check all applicable)			
(Last) (I	Girst) (M	iiddle) 3	3. Statement for Issuer's Fiscal Year Ended –				_X_ Director 10% Owner X_ Officer (give title Other (specify below) VICE PRESIDENT & C.F.O.			
2250 EAST 73RI	ST, SUIT	TE 300								
(S		4. If Amendment, Date Original Filed(Month/Day/Year)				(6. Individual or Joint/Group Reporting			
							(check applicable line)			
TULSA, OK 74136-6832 _X_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person Person										
(City) (S	state) (2	Zip)	Table	I - Non-Deri	vative Sec	urities	s Acqui	ired, Disposed of	f, or Beneficial	ly Owned
		ction Date 2A. Deemed Day/Year) Execution Date, if any (Month/Day/Year		3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A)			Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
					Amount	or (D)	Price	(Instr. 3 and 4)		
Common Stock, \$.10 12/3 par value	31/2004(1)	Â		A	2,616	A	\$ <u>(1)</u>	20,388	I	401(k) Plan
Common Stock, \$.10 Â par value		Â		Â	Â	Â	Â	15,977	D	Â

Persons who respond to the collection of information

contained in this form are not required to respond unless

SEC 2270

(9-02)

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the form displays a currently valid OMB control number.

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)	
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options	\$ 4.5	12/31/2004	Â	S	6,000	02/16/1998	02/16/2004	Common Stock	6,000

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

CHASTAIN PAUL R 2250 EAST 73RD ST SUITE 300

 \hat{A} X \hat{A} \hat{A} VICE PRESIDENT & C.F.O. \hat{A}

TULSA, OKÂ 74136-6832

Signatures

/s/ Paul R. 02/14/2005

**Signature of Date
Reporting Person

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) These shares were acquired during the fiscal year ended 12/31/04 pursuant to North American Galvanizing & Coatings, Inc. 401(k) Plan, at prices ranging from \$1.35 to \$2.40.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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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