

SIMMONS HARRIS H  
 Form 4  
 October 04, 2002

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

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).

(Print or Type Responses)

1. Name and Address of Reporting Person*			2. Issuer Name <b>and</b> Ticker or Trading Symbol				6. Relationship of Reporter to Issuer (Check all applicable)				
Simmons, Harris H.			Questar Corporation - STR				<input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below)				
(Last)	(First)	(Middle)	3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)		4. Statement for Month/Day/Year		7. Individual or Joint/Gross (Check Applicable Line)				
Zions Bancorporation					October 3, 2002		Form filed by One Reporting Person				
One Main Street							Form filed by More than One Reporting Person				
(Street)					5. If Amendment, Date of Original (Month/Day/Year)						
Salt Lake City, Utah 84111											
(City)	(State)	(Zip)	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 or Number of Securities Beneficially Owned		6. Ownership Form: Direct (D) or
					Code	V	Amount		Price		

Edgar Filing: SIMMONS HARRIS H - Form 4

	Day/ Year)	(Month/ Day/ Year)				(A) or (D)		Following Indirect Reported Transaction(s) (Instr. 4) (Instr. 3 and 4)
Common Stock (and attached Common Stock Purchase Rights)								3,200 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.

(Over)  
SEC 1474  
(9-02)

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	Expiration Date	Title	Amount or Number

Edgar Filing: SIMMONS HARRIS H - Form 4

												of Shares
Stock Option												
Phantom Stock Units	1-1	10-03-2002		A		25.5319						\$23.50

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

October 4, 2002

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Connie C. Holbrook as Attorney in Fact  
for Harris H. Simmons

Date

\*\*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.

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.