Edgar Filing: FLURY L RICHARD - Form 4

FLURY L RI	CHARD								
Form 4									
June 15, 2011	l								
FORM	4					~ ~		PPROVAL	
Washington, D.C. 20549						OMB Number:	3235-0287		
Check this if no long	er						Expires:	January 31,	
subject to	iect to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF						Estimated a	2005 average	
Section 16		SECURITIES						burden hours per	
Form 4 or Form 5			1(() 6.1	а	F 1	A (C1024	response	0.5	
obligation	· .	suant to Section				ge Act of 1934, of 1935 or Sectio	n		
may conti	nue. Section 17(a	30(h) of the 2	•	.			11		
See Instru	ction	50(II) of the	liivestineitt	Company	ACT OF 19	40			
1(b).									
(Print or Type R	esponses)								
1. Name and Address of Reporting Person <u>2</u> . Issuer Name and Ticker or Trading 5. Relation				-	o of Reporting Person(s) to				
FLURY L RICHARD			l			Issuer			
	QEP I	RESOURCH	ES, INC.	[QEP]	(Check all applicable)				
(Last)	(First) (M	Iiddle) 3. Date	3. Date of Earliest Transaction			(Chee	.k an application	()	
	(Month	(Month/Day/Year)			_X_ Director		6 Owner		
1050 17TH S	500 06/13/	2011			Officer (give titleOther (specify below)				
	4. If Ar	4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
	Filed(M	[onth/Day/Year])		Applicable Line)				
						_X_Form filed by 0 Form filed by N	One Reporting Po More than One Ro		
DENVER, C	0 80265					Person		eporting	
(City)	(State) ((Zip) Ta	ble I - Non-D	erivative S	ecurities Ac	quired, Disposed of	f, or Beneficia	lly Owned	
1.Title of	2. Transaction Date		3.	4. Securit				7. Nature of	
Security	(Month/Day/Year)			onAcquired			Form: Direct	Indirect	
(Instr. 3)		any (Month/Day/Yea	Code r) (Instr. 8)	Disposed (Instr. 3, 4		•	(D) or Indirect (I)	Beneficial Ownership	
		(1101111)2 uj, 101	(insur 0)	(1115117-0),	·		(Instr. 4)	(Instr. 4)	
					(A)	Reported			
					or	Transaction(s) (Instr. 3 and 4)			
~			Code V	Amount	(D) Price	(instr. 5 and 4)			
Common						13,787.5	D		
Stock									

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed ((D) (Instr. 3, 4, and 5)	Derivative Expiration Date (Month/Day/Year) Acquired (A) or Disposed of D) Instr. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (I	D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Phantom Stock Units	\$ 0	06/13/2011		А	5.3659	(1)	(1)	Phantom Stock Units	5.3659
Phantom Stock Units	\$ 0	06/13/2011		А	5.1769	<u>(1)</u>	<u>(1)</u>	Phantom Stock Units	5.1769
Stock Option	\$ 9.19					08/11/2003	02/11/2013	Common Stock	0

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
FLURY L RICHARD 1050 17TH STREET, SUITE 500 DENVER, CO 80265	Х					
Signatures						
Abigail L. Jones, Attorney in Fact	06/14/2011					
**Signature of Reporting Person	D	ate				

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).

Phantom stock units will be payable in cash on the date of, or at a designated anniversary date following, the first to occur of the reporting person's (i) separation from service from QEP(subject to 6-month delay if necessary to comply with IRC 409A), (ii) death or (iii) disability, pursuant to the QEP Resources, Inc. Deferred Compensation Wrap Plan. This total includes shares attributable to the 401(k) supplemental program of the Deferred Compensation Wrap Plan. Consequently, share totals may change without any visible activity.

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.