SEC For		<i>a</i>		:n ст/	TEC			ודוס			EVOUA							
	FORM	UNITED STATES SECURITIES AND EXCHANGE COMM Washington, D.C. 20549											1331011		OME	B APPRC)VAL	
Section 16. Form 4 or Form 5 obligations may continue. See					ed purs	IT OF CHANGES IN BENEFICIAL OWNER									COMB Number: 3235-02 Estimated average burden hours per response: C			
1. Name and Address of Reporting Person* <u>Richards Perry H</u>						2. Issuer Name and Ticker or Trading Symbol <u>QEP RESOURCES, INC.</u> [QEP]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			
(Last) (First) (Middle) 1050 17TH STREET, SUITE 500						3. Date of Earliest Transaction (Month/Day/Year) 02/14/2011								X Officer (give title Other (specify below) below) Sr VP, QEP Field Services				
(Street) DENVER CO 80265 (City) (State) (Zip)					- 4.1									Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - N	on-Deriv	vative	e Sec	curiti	es Ac	quire	d, Di	isposed	of, or Be	eneficia	lly Owne	d			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day						Execution Date,			3. Transaction Code (Instr. 8)				d (A) or r. 3, 4 and	5. Amount Securities Beneficial Owned Fo	Forr		Direct Indirect E tr. 4) C	7. Nature of ndirect Beneficial Dwnership Instr. 4)
									Code	v	Amount	(A) or (D)	Price	Reported Transactio (Instr. 3 ar	ion(s)			msu. 4)
Common Stock 02/14/20					2011	11			F		694	D \$38		28,262 ⁽¹⁾			D	
Common Stock														3,518.1	1 606 ⁽²⁾		I I	Employee Investment Plan
		1	able II								posed of converti			y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Dee Executio if any (Month/		4. Transa Code (8)				6. Date Exerci Expiration Dat (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownershi (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares					
Phantom Stock Units	\$0.00								(3)		(3)	Phantom Stock Units	0		2,212.	.9003	D	
Stock Option	\$9.19								08/11/20	003	02/11/2013	Common Stock	0		3,0	00	D	

Explanation of Responses:

\$23.98

\$27.55

1. I received a distribution of formerly restricted shares of stock and made an advance election to satisfy my tax payment obligations by selling shares to QEP.

2. As of February 14, 2011, I have 3,518.1606 equivalent shares of stock in QEP's Employee Investment Plan. The number of equivalent shares will fluctuate as QEP's stock price changes; this fluctuation does not reflect any transactions that should be reported.

(4)

(5)

3. Vested shares of 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.

4. The option vests in three annual installments which began on March 5, 2010.

5. The option vests in three annual installments beginning on March 5, 2011, subject to accelerated vesting upon the occurrence of certain events as set forth in the award agreement.

Remarks:

Stock

Option Stock

Option



0

0

Common Stock

Common

Stock

03/05/2016

03/05/2017

25,000

15,000

D

D

** Signature of Reporting Person Date

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).

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.