FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

hours per response

OMB Number: 3235-0287 Estimated average burden

0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* SCOGGINS MYLES W													5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
					<u>Qui</u>	<u>ILLUCCI</u>	\CI	<u>10, 1110</u>	<u> </u>	QLI J			X	Director			10% Ow	/ner	
(Last) (First) (Middle) 1050 17TH STREET, SUITE 500					3. Date of Earliest Transaction (Month/Day/Year) 12/31/2013									Officer (give title below)		Other (specify below)		pecify	
(Street) DENVER CO 80265					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi	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)																			
		1	able I - Non-	-Deriva	tive S	ecurities	Acc	uired,	Dis	osed of	f, or Be	nefic	ially (Owned					
Date				2. Transad Date (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr.			ties Acquired (A) or I Of (D) (Instr. 3, 4 and			5. Amount Securities Beneficiall Owned Fol Reported	y	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) c (D)	P P	rice	Transactio (Instr. 3 an				inisu. 4)	
Common Stock													7,700(1)			D			
			Table II - D			curities <i>A</i> Ils, warra								wned					
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)	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date E Expiratio (Month/D	n Dat		7. Title and Ame Securities Unde Derivative Secu (Instr. 3 and 4)		erlying	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficie Owned Followin Reported	ative rities ficially ed wing	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title		ount or ober of res		Transaction(s) (Instr. 4)				
Phantom Stock	\$0.00	12/31/2013		A		856.4437 ⁽²⁾		(3)		(3)	Phantom Stock	856	5.4437	\$30.65	65,322.	0988	D		

Explanation of Responses:

- 1. Some of these shares are held in a joint account with my spouse.
- 2. These phantom stock units were awarded to me as partial compensation for my services as a director, and were granted under the terms of QEP's Long-term Stock Incentive Plan. The units are restricted and vest one year from the date of grant, but I will not recognize the taxable value of the units until after my retirement as a voting director.
- 3. 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) distribution election date which is not earlier than two years from the plan year (ii) separation from service from QEP (subject to 6-month delay if necessary to comply with IRC 409A), (iii) death or (iv) disability, pursuant to the QEP Resources, Inc. Deferred Compensation Wrap

Remarks:

/s/ Abigail L. Jones, Attorney in

Fact

** Signature of Reporting Person Date

01/02/2014

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.