FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFIC	IAL OWNERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
l	Estimated average burde	en
l	hours per response:	0.5

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

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

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Name and Address of Reporting Person* TRICE D AVID: A						2. Issuer Name and Ticker or Trading Symbol OEP RESOURCES, INC. [QEP]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
TRICE DAVID A				-~=	X21 TESS OTTOEDS, 11 TO. [VET]										X Director				10% O	wner			
(Last) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)											ffice	(give title		Other (below)	specify		
` '	`	Γ, SUITE 500	(iviidale)		02/	/13/2	013											,		,			
1030 17.	III STREE.	1, SUITE 500																					
					4. 1	If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line)							
(Street) DENVE	R CO	<u> </u>	80265													X F	orm	filed by One	e Rep	orting Perso	on		
DENVER CO 80203																Form filed by More than One Reporting Person							
(City)	(St	tate)	(Zip)												r	erso	11						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																							
				2. Trans Date	action	action 2A. Deemed			3.	eactic			rities Acquired (A) ed Of (D) (Instr. 3,							wnership n: Direct	7. Nature of Indirect		
				(Month/Day/Year)		ar) i	if any (Month/Day/Year		Code (Instr. 5)		5)				Bene		icially (D		or Indirect (Instr. 4)	Beneficial Ownership			
									"' "'	8)					Reporte		ed () ()		IIISU. 4)	(Instr. 4)			
									Cod	• V	- -	Amount	(A)	or	Price	(Ins	tr. 3	ction(s) 3 and 4)					
Common Stock																	7,500			D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
			(0	e.g., p	uts, d	calls	, warr	ants	, optic	ns,	COI	nverti	ble se	curit	ties) [°]								
1. Title of	2.	3. Transaction Date (Month/Day/Year)	3A. Deemed		4. Transaction Code (Instr.		on of		6. Date Exercis			le and	7. Title and			8. Price		9. Number of		10.	11. Nature		
Derivative Security	Conversion or Exercise		Execution if any						Expirati (Month/				Amount of Securities			Derivative Security		derivative Securities		Ownership Form:	Beneficial		
(Instr. 3) Price of (Month/Day/Year) 8 Derivative Security					8)		Securities Acquired		Underlying Derivative Security (Instr. 3 and 4)						(Instr. 5)		Beneficially Owned		Direct (D) or Indirect	Ownership (Instr. 4)			
							(A) or Dispos	tr. 3								Following Reported Transaction(s) (Instr. 4)		(I) (Instr. 4)					
							of (D) (Instr. 3, 4 and 5)																
				L													(111041. 4)						
														An	nount	nt							
									Date		Evn	oiration			ımber								
				- 1	Code	v	(A)		Exercis	ble	Date		Title		nares								
Phantom Stock Units	\$0.00	02/13/2013			A		5,811		(1)			(1)	Phanton Stock Units	5	,811	\$30.1	2	14,302.84	45	D			

Explanation of Responses:

1. 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 Plan.

Remarks:

Abigail L. Jones, Attorney in

02/19/2013

Fact

** 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.