SOUTHWEST GAS CORP

Form 4

September 06, 2007

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number:

Estimated average

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

Form 4 or Form 5 obligations may continue.

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(h) of the Investment Company Act of 1940

burden hours per response... 0.5

OMB APPROVAL

See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * CENTRELLA ROY R

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

SOUTHWEST GAS CORP [SWX]

(Check all applicable)

(Last)

(First)

(Middle)

3. Date of Earliest Transaction

10% Owner

5241 SPRING MOUNTAIN ROAD

(Street)

09/04/2007

(Month/Day/Year)

Director _X__ Officer (give title below)

Other (specify

VP/Controller/CAO

4. If Amendment, Date Original

Filed(Month/Day/Year)

Applicable Line) _X_ Form filed by One Reporting Person

6. Individual or Joint/Group Filing(Check

Form filed by More than One Reporting Person

LAS VEGAS, NV 891500002

(City)	(State) (Z	Table	I - Non-De	rivative S	ecurit	ies Acqui	ired, Disposed of	or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	or	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common stock	09/04/2007		A(1)	40.8	A	\$ 29.11	12,201.03	D	
Common stock 401k	09/04/2007		A(2)	35	A	\$ 29.11	3,553.97	I	By 401(k)
Common Stock/2006 Restricted Stock	09/04/2007		A(3)	5.52	A	\$ 29.11	753.8	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration Date		Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									Amount		
						Date	Expiration	Title	or Number		
						Exercisable	Date	Title	of		
				Code V	(A) (D)						
				Coue v	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

CENTRELLA ROY R 5241 SPRING MOUNTAIN ROAD LAS VEGAS, NV 891500002

VP/Controller/CAO

Signatures

By: Karen W. 09/06/2007 Stanfield, POA

**Signature of Reporting Person Date

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).
- (1) Pursuant to the stock dividend/dividend reinvestment feature of the SWX restricted stock plan, paid dividends on 9/4/07 with a record date of 8/15/07
- (2) Pursuant to the dividend reinvestment feature of SWX 401(k) Plan, dividend paid on 9/4/07
- (3) Pursuant to the dividend reinvestment feature of SWX 2006 Restricted Stock Plan, paid dividends 9/4/07 with a record date of 8/15/07 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.

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