Sectio obliga

## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

C. 20549

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*  BELTZ MICHAEL A															all app Direct Office	er (give title	v (	, 0% O Other (	wner specify	
(Last) (First) (Middle) 17655 WATERVIEW PARKWAY						3. Date of Earliest Transaction (Month/Day/Year) 03/31/2004									X Office (give title X Offier (specify below)  Executive Vice President / President Utility  Services					
(Street)  DALLAS	•													6. Indiv Line)	· '					
(City)	(St		Zip)		<u></u>									<u> </u>	Pers	on				
		Tabl	e I - Nor	1-Deriv	ative	Sec	curitie	s Ac	quired,	Dis	posed o	t, or E	3ene	ficially	Owne	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Executio			n Date,	3. Transaction Code (Instr. 8)					Securi Benefi	cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) (D)	or F	Price	Transa	action(s) 3 and 4)			(		
Common Stock 03/31/						2004		S <sup>(1)</sup>		3,000 D		) :	\$33.55	82,561 <sup>(2)</sup>		D				
		Та									sed of, onvertib				wned					
1. Title of Derivative Security (Instr. 3)	ative Conversion Date, if any Execution Date, or Exercise (Month/Day/Year)			Date,	Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title Amour Securit Underl Derivat Securit and 4)	nt of ties ying tive	Deri Sec (Ins	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Share	ber						

### **Explanation of Responses:**

1. The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on February 25, 2004. The trading plan was established to sell up to 7,000 shares of the Company's common stock. Portions of the shares may be sold on specified dates or any time the stock achieves certain pre-arranged minimum prices and may take place beginning on February 27, 2004 and ending on December 1, 2004, unless sooner terminated. The Reporting Person will have no control over the timing of any sales under the plan and there can be no assurance that the shares covered by the plan actually will be sold. The Reporting Person entered into the plan for personal tax and financial planning purposes and will continue to have a significant ownership interest in the Company.

2. The total number of securities beneficially owned includes: (a) 2,001 shares acquired through the Company employee stock purchase program; (b) 53,379 shares acquired by the exercising of vested employee stock options; (c) 1,000 shares purchased on the open market; (d) 21,000 out of an original 35,000 shares of restricted stock granted 9/1/00, of which 7,000 shares are vested; (e) 277 out of an original 6,277 shares of performance-based restricted stock granted 6/24/03, which is fully vested; and (f) 4,904 shares of performance-based restricted stock granted 2/2/04, of which 0 shares are vested.

# Remarks:

Leigh Ann K. Epperson, 04/02/2004 **Attorney** in 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.