FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | D.C. 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | VAL | | | | | | | | |
|--------------------------|--|--|--|--|--|--|--|--|--|
| | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response: | 0.5 | | | | | | | | |
| | OMB Number: Estimated average burde | | | | | | | | |

| | ion 1(b). | nac. occ | | Filed | l pursu | ant to | o Sectio | n 16(a) | of the S | ecurit | ies Exchan | ae Act | of 1934 | 4 | | liouis | per response. | 0.5 | |
|--|---|--|---|-----------------|---|---|----------|-----------------------------------|--|--|----------------------|---|--------------------------------|------------------------|--|--|---|--|--|
| | (-) | | | | | | | | | | mpany Act | | | | | - | | | |
| 1. Name and Address of Reporting Person* KROPID JAMES J | | | | | 2. Issuer Name and Ticker or Trading Symbol SOUTHWEST GAS CORP [SWX] | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
| (Last) (First) (Middle) 5241 SPRING MOUNTAIN ROAD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/01/2011 | | | | | | | | | | Offic below | er (give title w) | | Other (specify below) | |
| (Street) LAS VE | | | 39150-0002 Zip) | 2 | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tabl | e I - Non-l | Deriva | ative | Sec | curitie | s Acc | quired, | Dis | posed o | f, or | Bene | ficia | lly Own | ed | | | |
| Date | | | | /Day/Year) Ex | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disposed Code (Instr. | | ties Acquired (A) I Of (D) (Instr. 3, 4 | | | d 5) Secur Benef | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | Code | v | Amount | (A (E | A) or D) | Price | Trans | action(s) 3 and 4) | | (11150.4) | |
| Common | Common Stock 03/01/ | | | | 2011 | | | | A | | 42.419 | 9 | A | \$38. | 71 13, | 688.758 | D | | |
| | | Та | ıble II - De (e. | | | | | | | | osed of, onvertib | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/ | ate, T | 4. Transaction Code (Instr. 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | 8. Price of Derivative Security (Instr. 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 | ıble | Expiration Date | Title | Amo or Num of Shar | ber | | | | | |

Explanation of Responses:

Karen W. Stanfield, POA

03/03/2011

** 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.