FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | |
| 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

| 1. Name and Address of Reporting Person * $\underline{Taylor\ Jack\ T}$ | | | | | 2. Issuer Name and Ticker or Trading Symbol SEMPRA ENERGY [SRE] | | | | | | | (Che | elationship o eck all applic Director | able) | g Pers | on(s) to Issu 10% Ov | |
|--|---|--|--|--------------|---|--|-------|--|-----------------|------|---|-------------------------------------|--|---|------------------|--|--|
| (Last) (First) (Middle) 101 ASH STREET | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/04/2013 | | | | | | | | Officer below) | (give title | | Other (s below) | pecify |
| (Street) SAN DII (City) | | | 92101 (Zip) | 4 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Line |) 【 Form fi | or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting son | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | te | Execution Da | | Date, | 3. Transact Code (In: | ion Disp | | | | 5. Amoun Securities Beneficia Owned Fo | s lly ollowing | Form: | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | Code | / Amo | ount | (A) oi (D) | Price | Transacti (Instr. 3 a | action(s) | | | (Instr. 4) |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| 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/Yea | Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and of Securiti Underlying Derivative (Instr. 3 an | es Security | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio | s S Ily | Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | | Date Exercisable | Expirat Date | | Title | Amount or Number of Shares | | (Instr. 4) | uii(S) | | |
| Phantom Shares ⁽¹⁾ | (2) | 10/04/2013 | | A | | 146.052 | | (3) | (4) | (| Common Stock | 146.052 | \$85.59 | 2,879.90 | 2 ⁽⁵⁾ | D | |

Explanation of Responses:

- 1. Phantom shares of Sempra Energy Common Stock acquired as director compensation.
- 2. Conversion of derivative security is 1 for 1.
- $\ensuremath{\mathsf{3}}.$ Date exercisable is immediate for shares that have vested.
- 4. Expiration date is Not Applicable.
- 5. Total includes 2,323.319 unvested restricted phantom shares that are subject to forfeiture if service as a director terminates prior to vesting for any reason other than death, disability or removal without cause.

Remarks:

JACK T. TAYLOR BY: James
M. Spira, Chief Corporate
Counsel of Sempra Energy and

10/07/2013

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.