FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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* HATFIELD JAMES R | | | | | 2. Issuer Name and Ticker or Trading Symbol OGE ENERGY CORP [OGE] | | | | | | | (Che | elationship of ck all applica Director | able) |) Perso | on(s) to Issu 10% Ov Other (s | ner |
|--|--|--|--|----------------|--|--------|--------------------------------|---|-----|--------------------------|--|--|---|--|--|--|---------------------------------------|
| (Last) (First) (Middle) P O BOX 321 MC/1110 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/29/2003 | | | | | | | _ X | below) | (give title Sr VP CFO | | below) | респу |
| (Street) OKLAH CITY | OMA O | K | 73101 | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Line) | Individual or Joint/Group Filing (Check Applicable lee) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | State) | (Zip) | | | | | | | | | | F 613011 | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | |
| Date | | | l. Transact Date Month/Day | Execution Date | | | Code (Instr. | | | | 5. Amoun Securities Beneficial Owned Fo | s For ally (D) ollowing (I) (| | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | Transactio (Instr. 3 ar | ion(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 | 5. Number of Operivative Securities Acquired (A) or Disposed of (D) (Inst 3, 4 and 5) | | ve les ed ed nstr. | 6. Date Exerc Expiration Da (Month/Day/\) | ate | | 7. Title an of Securit Underlyin Derivative (Instr. 3 ar | ies g Security | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | ve es ially ng ed etion(s) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | | opiration ate | Title | Amount or Number of Shares | | | | | |
| Stock Equivalent Units | \$0 ⁽¹⁾ | 08/29/2003 | | А | | 23.343 | | 08/08/1988 ⁽²⁾ | 08 | 3/08/1988 ⁽²⁾ | Common Stock | 23.343 | \$19.92 | 549.21 | 16 | D | |

Explanation of Responses:

- 1. Security converts to common stock on a one-for-one basis.
- 2. The Common Stock Units were accrued under the Deferred Compensation Plan of OGE Energy Corp. and are to be settled 100% in cash at a specified future date or following termination of service.

James R. Hatfield

09/02/2003

** 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.