FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0104							
Estimated average burden								
hours per response:	0.5							

## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

MIJELLED MADY D		Date of Event Reatement (Month/I		3. Issuer Name and Ticker or Trading Symbol ST MARY LAND & EXPLORATION CO [ SM ]							
(Last) 1776 LINCOLN SUITE 700 (Street) DENVER (City)	(First) STREET CO (State)	(Middle)  80203  (Zip)				ionship of Reporting Person(s all applicable) Director Officer (give title below) Senior Vice Pres	10% Owner Other (spec below)	ify	(Month/Day/ 6. Individual Applicable Li X Forr	Year) or Joint/ine) m filed by	te of Original Filed  Group Filing (Check  y One Reporting Person y More than One Reporting
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)			-		nt of Securities illy Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
No securities beneficially owned					0	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable a Expiration Date (Month/Day/Year)		ate	3. Title and Amount of Securities Derivative Security (Instr. 4)		Conv or Ex		sion Form: cise (D) or	` '	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration Date	n Title		Amount or Number of Shares	Price of Derivati Security	ve (Instr.		

Explanation of Responses:

/s/ Karin M. Writer (Attorney-In-

Fact)

\*\* Signature of Reporting Person Date

09/10/2007

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).