Edgar Filing: CRIMSON EXPLORATION INC. - Form 4

CRIMSON EXPLORATION INC. Form 4 October 09, 2007 OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading KEEL ALLAN D Issuer Symbol CRIMSON EXPLORATION INC. (Check all applicable) [CXPO.OB] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner X__Officer (give title Other (specify (Month/Day/Year) below) below) C/O CRIMSON EXPLORATION 09/28/2007 President & Chief Exec Officer INC., 717 TEXAS AVENUE, **SUITE 2900** (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting HOUSTON, TX 77002 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities Acquired 5. Amount of 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if Transaction(A) or Disposed of Securities Form: Direct Indirect (Instr. 3) Code Beneficially (D) or Beneficial any (D) (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4) Reported (A) Transaction(s) or (Instr. 3 and 4) Price Code V Amount (D) Common 09/28/2007 \$0 D Α 50,000 A 62,000 Stock (1)

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

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 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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Other KEEL ALLAN D C/O CRIMSON EXPLORATION INC. President & Chief Exec Officer 717 TEXAS AVENUE, SUITE 2900 HOUSTON, TX 77002 Signatures Stephen W. 10/09/2007 Schoppe **Signature of Date

**Signature of Reporting Person

Explanation of Responses:

- * 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).

The acquired Common Stock are restricted shares which will vest in the following increments: 33% of total on the first anniversary of

(1) date of grant; 23% of total on the second anniversary of date of grant; 22% of total on the third anniversary of date of grant and 22% on the fourth anniversary of date of grant. The Grantee is required to provide the Company continuous service or any Affiliate through the applicable vesting period in order to be entitled to receive the applicable stock award tranche.

Remarks:

The Form has been signed by Stephen W. Schoppe, Acting Secretary for Crimson Exploration Inc., on behalf of Mr. Keel purs to an instrument of power of attorney dated February 23, 2006. The authority granted pursuant to such instrument are to remain in full force and effect until rescinded in writing.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.