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AUG 18 2005

DEPT OF ENVIRONMENT & NATURAL RESOURCES - RCRO

APPLICATION FOR PERMIT TO DRILL

Type of work: Drill New Well Reenter Well Drill Directional Well Other _____

Type of well: Oil Well Gas Well Injection Other _____

Name and Address of Operator: Continental Resources, Inc. P.O. Box 1032, Enid, OK 73702 Telephone: (580) 233-8955

Name and Address of Surface Owner: State of South Dakota, Tenant: Bill Clarkson
 P.O. Box 184, Buffalo, SD 57720
 Name and Address of Drilling Contractor and Rig Number: J&R Well Service
 791 LANE 9, Powell, WY 82435

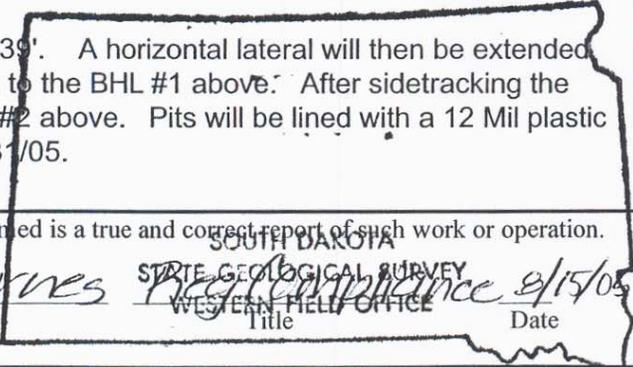
Surface Location of well: Qtr-Qtr, Sec, Twp, Rge, County, feet from nearest lines of section, and latitude and longitude (if available):
 SHL 624' FSL & 768' FWL, Sec. 9-T21N-R4E
 If Directional, top of pay and bottom hole location from nearest lines of section: TOP @ 8550
 Lateral #1 BHL @ 300' FNL & 1200' FEL of Sec. 17-21N-4E
 Lateral #2 BHL @ 1600' FSL & 2600' FWL of Sec. 9-21N-4E
 Acres in Spacing (Drilling) Unit: Total acres in unit 7,675.65
 Description of Spacing Unit: Buffalo Red River Unit order # 6-81

Well Name and Number	Elevation	Field and Pool, or Wildcat	Proposed Depth and Formation
BRRU # 14-9	3068 DL	Buffalo	Red River "B" Dual Lateral/TD @ 11,000'

Size of Hole	Size of Casing	Weight per Foot	Depth	Cementing Program (amount, type, additives)	Depth
1)	8 5/8"	24	788	450 sx Poz	
2)	4 1/2"	9.5, 11.6	8584	650 sx Poz	
3)					
4)					

Describe Proposed Operations (Clearly State all Pertinent Details, and Give Pertinent Dates, Including Estimated Date of Starting any Proposed Work). Use additional page(s) if appropriate.
 A window will be cut in the 4 1/2" csg for the KOP of 8439'. A horizontal lateral will then be extended through the currently producing Red River "B" formation to the BHL #1 above. After sidetracking the original curve, a second lateral will be extended to BHL #2 above. Pits will be lined with a 12 Mil plastic liner. Activity is expected to commence on or about 8/31/05.

I hereby certify that the foregoing as to any work or operation performed is a true and correct report of such work or operation.
 Signature: Becky Barnes Name (Print): Becky Barnes Title: Regional Compliance Date: 8/15/05



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Approved By: [Signature] Title: Oil & Gas Supervisor

Permit No. 1762 API No. 40 063 05053.01 Date Issued: 08/25/05

Conditions, if any, on attached page.