longer subject to

Check this box if no

Section 16. Form 4 or

Form 5 obligations

may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL OMB 3235-Number: 0287 Estimated average burden hours per response...

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

(Print or Ty	pe Resp	onses)														
1. Name and Address of Reporting Person * DAVIDSON CHARLES E				2. Issuer Name and Ticker or Trading Symbol GULFPORT ENERGY CORP [GPOR]				Is	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner Officer (give title Other (specify below)							
(Last) (First) (Middle) C/O WEXFORD CAPITAL LLC, 411 WEST PUTNAM AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 05/03/2006					be	elow)						
(Street) GREENWICH, CT 06830			4. If Amendment, Date Original Filed(Month/Day/Year)					A	6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				1			
(City)		(State) (Zi	p)	Table I	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially O				lly Owne	d						
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	any		Transaction Code		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of	5. Amount of Securities Beneficially Ow Following Repo Transaction(s)				direct ficial ership		
					Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)		(I) (Instr. 4	ì	. 4)		
Common	Stock	05/03/2006			S		5,631,011	D	\$ 14	0		I	See foots	note		
Common	Stock									13,195,478		I	See footi	note		
Common	Stock									810,957		I	See foots	note		
Reminder: F	~	n a separate line for	each cl	ass of securi	ties benef	ficiall	y owned									
						ir re	nformation equired to	con resp	tained oond u	I to the colle I in this form Inless the fo	are r	ot		C 1474 (9-02)		
		Table II		ative Securit	_		-			icially Owned	1					
(Instr. 3)	Convers	ve (Month/Day/Y	3A Ex	3A. Deemed Execution Date	4. Tran	nsacti	5. Number of Derivativ Securitie Acquired (A) or Disposed of (D) (Instr. 3,	5. n Number of and Exon Derivative Securities Acquired (A) or Disposed		exercisable ration Date Day/Year)	Amou Under Securi	Amount of Underlying Securities (Instr. 3 and	Derivative Security Instr. 5)	f 9. Number of e Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Derivative Security: Direct (D) or Indirect	11. Nature of Indirec Beneficial Ownershi (Instr. 4)
					Co	de	V (A) (D	E	ate xercisal	Expiration Date	Title I	Amount or Number of Shares				

Reporting Owners

	Donouting Own or Name / Address	Relationships					
	Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
2	DAVIDSON CHARLES E C/O WEXFORD CAPITAL LLC 411 WEST PUTNAM AVENUE GREENWICH, CT 06830		X				

Signatures

/s/ Charles E. Davidson	05/03/2006
Signature of Reporting Person	Date

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).

 These shares were beneficially owned by seven entities (the "Wexford Entities") for which Wexford Capital LLC ("Wexford") serves as
- (1) either investment manager, manager or sub-advisor. The Reporting Person is President, Managing Member and a controlling member of Wexford. The Reporting Person disclaims beneficial ownership of these shares for purposes of Rule 16a-3(a) promulgated under the Securities Exchange Act of 1934, as amended.
- (2) These shares are beneficially owned by CD Holding Company LLC ("CDH"), a limited liability company of which the Reporting Person is the sole manager and a controlling person.
- $\textbf{(3)} \ These \ shares \ are \ beneficially \ owned \ in \ an \ IRA \ for \ the \ benefit \ of \ the \ Reporting \ Person \ (the \ "IRA").$

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.