SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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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

1. Name and A Foster Mic	orting Person [*]	2. Date of E Requiring S (Month/Day 05/11/202	tatement /Year)	3. Issuer Name and Ticker or Trading Symbol <u>NATURAL GAS SERVICES GROUP INC</u> [NGS]						
(Last) (First) (Middle) 404 VETERANS AIRPARK LANE SUITE 300					4. Relationship of Reporting Issuer (Check all applicable) Director X Officer (give title below) Chief Financial		F	5. If Amendment, Date of Original Filed (Month/Day/Year)		
						below)	(specify (C)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
(Street) MIDLAND	ТХ	79705			Chief Financia	Unicer			by More than One Person	
(City)	(State)	(Zip)								
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)				6	2. Amount of Securities Beneficially Owned (Instr. I)			Nature of Indirect Beneficial /nership (Instr. 5)		
Common Stock					0	I)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Se Underlying Derivative Se (Instr. 4)		4. Conversio or Exercis Price of	e Form:	6. Nature of Indirect Beneficial Ownership (Instr.		
		Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)		
Explanation of Responses:										

Micah C. Foster

05/14/2021 Date

** Signature of Reporting Person

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 5 (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.