

OMB APPROVAL
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Estimated average burden: 0.5 hours per response

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Address of Reporting Person: Hazlett James R.
2. Issuer Name and Ticker or Trading Symbol: NATURAL GAS SERVICES GROUP INC [NGS]
3. Date of Earliest Transaction: 03/20/2023
4. If Amendment, Date of Original Filed
5. Relationship of Reporting Person(s) to Issuer: X Chief Technical Officer
6. Individual or Joint/Group Filing: X Form filed by One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned
Table with 11 columns: Title of Security, Transaction Date, Deemed Execution Date, Transaction Code, Securities Acquired/Disposed, Amount, Price, Ownership Form, Nature of Ownership. Includes entries for Common Stock.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)
Table with 11 columns: Title of Derivative Security, Conversion or Exercise Price, Transaction Date, Deemed Execution Date, Transaction Code, Number of Derivative Securities, Date Exercisable and Expiration Date, Title and Amount of Securities Underlying Derivative Security, Price of Derivative Security, Number of derivative Securities Beneficially Owned, Ownership Form, Nature of Indirect Beneficial Ownership.

Explanation of Responses:

James R. Hazlett 03/22/2023
** Signature of Reporting Person Date

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 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).

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.