FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
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hours per response:	0.5								

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1. Name and Address of Reporting Person* <u>Lawrence James R</u>					NA	2. Issuer Name and Ticker or Trading Symbol NATURAL GAS SERVICES GROUP INC [ngs]								(Che	5. Relationship of Report (Check all applicable) Director Officer (give title			10% Ow		
(Last) (First) (Middle) C/O NATURAL GAS SERVICES GROUP, INC. 404 VETERANS AIRPARK LANE, SUITE 300					3. Date of Earliest Transaction (Month/Day/Year) 10/01/2020								,	VP &	v) `` & Chief F		below)	er		
(Street) MIDLAND TX 79705 (City) (State) (Zip)					4. If <i>F</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Inc	'						
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	3ene	ficial	ly Own	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,		Date,	3. Transaction Code (Instr. 8) 4. Securities Acquii Disposed Of (D) (In					5. Amount of Securities Beneficially Owned Following Reported		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code V		Amount	(A) (D)	or F	Price	Transa	Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 10/01/2				2020				F		391 D		5	\$8.88	4	4,609		D			
		Tal									osed of, onvertib				Owne	d		,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	ate, Transaction Code (Instr				6. Date Exercisab Expiration Date (Month/Day/Year)		te	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		S (I	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e C S Illy C C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amo or Num of Shar	ber						

Explanation of Responses:

James R. Lawrence

10/02/2020

** 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 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.