FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

viasinigion, D.O. 2004

OMB APPROVAL									
	OMB Number:	3235-0287							
	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).

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

					or S	Section	on 30(h)	of the	Investment	Con	npany Act	of 1940							
1. Name and Address of Reporting Person* <u>CURTIS CHARLES G</u>					2. Issuer Name and Ticker or Trading Symbol NATURAL GAS SERVICES GROUP INC NGS										5. Relationship of Reporting Person(s) to Issu (Check all applicable) X Director 10% Ow				
(Last) (First) (Middle) 1 PENROSE LANE					3. Da	3. Date of Earliest Transaction (Month/Day/Year) 12/31/2012										Officer (give title below)		Other (spi below)	
(Street) COLORADO SPRINGS CO 80906					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	te) (Z	(ip)																
			e I - Nor			_			quired, [Dis					1			[-	
Date (Mor				Date	Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr.			Of (D) (Ins	es Acquired (A) Of (D) (Instr. 3, 4		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	V	Amount	(A) or (D)	_		Transaction(s) (Instr. 3 and 4)				
Common S	tock				./2012				G		12,000			SO ⁽¹⁾		857		D	
		Tá							uired, Di , options						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	ate Execution Date, Transaction Of Expiration Date Amount Securities Code (Instr. Securities Acquired Acquired Code (Instr. Securities Acquired Code (Instr. Securities Code (Instr. Securities				7. Title an Amount of Securities Underlyin Derivative (Instr. 3 a	of S g e Secu		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershij (Instr. 4)					
					Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	Amo or Num of Shar	ber					
Nonqualified Stock Option (right to buy)	\$3.88								12/31/2002	2 1	12/31/2012	Common Stock	2,5	00		2,500		D	
Nonqualified Stock Option (right to buy)	\$5.55								12/31/2003	3 1	12/31/2013	Common Stock	2,5	00		2,500		D	
Nonqualified Stock Option (right to buy)	\$9.34								01/05/2005	5 (01/05/2015	Common Stock	2,5	00		2,500		D	
Nonqualified Stock Option (right to buy)	\$16.96								12/30/2005	5 1	12/30/2015	Common Stock	2,5	00		2,500		D	
Nonqualified Stock Option (right to buy)	\$13.9								01/01/2007	7 (01/01/2017	Common Stock	2,5	00		2,500		D	
Nonqualified Stock Option (right to buy)	\$19.61								12/31/2007	7 1	12/31/2017	Common Stock	2,5	00		2,500		D	
Nonqualified Stock Option (right to buy)	\$8								03/31/2009	9 (03/18/2019	Common Stock	2,5	00		2,500		D	
Nonqualified Stock Option (right to buy)	\$20.48								03/31/2008	3 (03/18/2018	Common Stock	2,5	00		2,500	'	D	
Nonqualified Stock Option (right	\$16.74								03/31/2010		03/22/2020	Common Stock	5,0	00		5,000		D	

Explanation of Responses:

 $^{1. \} The \ gift \ of \ stock \ did \ not \ involve \ payment \ of \ any \ consideration \ by \ the \ recipient \ of \ the \ gift.$

** 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.