FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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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

Name and Address of Reporting Person* <u>Jenvey Nigel</u>			Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 04/01/2021 3. Issuer Name and Ticker or Trading Symbol NATURAL GAS SERVICES GROUP INC [NGS]							
(Last) 404 VETER	(Last) (First) (Middle) 404 VETERANS AIRPARK LANE				Relationship of Reporting Person(s) to Issuer (Check all applicable)				5. If Amendment, Date of Original Filed (Month/Day/Year)		
SUITE 300			,		X Director Officer (give title below)	10% C Other below)	(specify	(Ch	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
(Street) MIDLAND	TX	79705	,							by More than One Person	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)				1							
1. Title of Sect	urity (Instr. 4)				2. Amount of Securities Beneficially Owned (Instr. 4)	3. Owner Form: I (D) or II (I) (Inst	Direct ndirect		ature of Indire ership (Instr. !		
Title of Second Common Store					Beneficially Owned (Instr.	Form: [(D) or li	Direct ndirect r. 5)				
				Perivative	Beneficially Owned (Instr. 4)	Form: I (D) or li (I) (Inst	Direct ndirect r. 5)	Own			
	ock	(e.g.		Perivative Is, warra	Beneficially Owned (Instr. 4) 0 Securities Beneficiants, options, convert	Form: I (D) or II (I) (Insti	Direct ndirect r. 5)) sion cise			

Explanation of Responses:

Nigel Jenvey

04/05/2021

** 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 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.