SEC Form 4	1
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FORM 4
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Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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IJ		-						
Ì	OMB Number:	3235-0287						
Estimated average burden								
	hours per response:	0.5						

Section 2	16. Form 4 or F ns may continu on 1(b).	orm 5	<b>U</b>	File							es Exchang npany Act o		1934					verage burde sponse:	n 0.5	
1. Name and Taylor S	NA	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name <b>and</b> Ticker or Trading Symbol NATURAL GAS SERVICES GROUP INC [ NGS ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner X Officer (give title Other (spectrum) balawith balawith balawi				wner						
(Last) (First) (Middle) 508 WEST WALL STREET, SUITE 550						3. Date of Earliest Transaction (Month/Day/Year) 09/10/2008									below) below) President and CEO					
(Street) MIDLAND TX 79701 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tabl	le I - Nor	n-Deriv	ative	e Sec	urities	Aco	quired,	Disp	posed of	i, or Be	enefic	ally	Owned					
1. Title of Security (Instr. 3) Date (Month/D				Execution Date,			Code (	Transaction Disposed C Code (Instr. 5)						s   Ily	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A) or (D) Price		ice	Transaction(s) (Instr. 3 and 4)				(insu. 4)			
Common S	Stock							1,0	00		D									
		т									osed of, onvertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemo Execution if any (Month/Da	ed Date,	4. Transaction Code (Instr. 8)		5. Number 6 on of F		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Am of Securities Underlying Derivative Seci (Instr. 3 and 4)		mount 8. Price o Derivative Security curity (Instr. 5)		9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	re Owners es Form: ally Direct ( or Indir g (I) (Inst tion(s)		Beneficial Ownership (Instr. 4)	
					Code			Date Exercisa		Expiration Date	Title	Amo or Nun of Sha								
Nonstatutory Stock Option (right to buy) <sup>(1)</sup>	\$9.22								01/13/20	006	08/24/2015	Commo Stock		000		45,00	10	D		
Nonstatutory Stock Option (right to buy) <sup>(2)</sup>	\$14.22								11/21/20	07	11/21/2016	Commo Stock		000		15,00	0	D		
Employee Stock Option (right to buy) <sup>(3)</sup>	\$20.06								01/15/20	009	01/15/2018	Commo Stock		000		40,00	0	D		
Employee Stock Option (right to buy) <sup>(4)</sup>	\$17.51	09/10/2008			A		25,000		09/10/20	009	09/10/2018	Commo Stock		000	\$0	25,00	0	D		

## Explanation of Responses:

1. Such option vests and is exercisable in three equal annual installments beginning January 13, 2006.

2. Granted pursuant to the Company's 1998 Stock Option Plan. The option is exercisable in two equal annual installments beginning November 21, 2007.

3. Granted pursuant to the Company's 1998 Stock Option Plan. The option is exercisable in three equal annual installments beginning January 15, 2009

4. Granted pursuant to the Company's 1998 Stock Option Plan. The option is exercisable in three equal annual installments beginning September 10, 2009

## /s/ Stephen C. Taylor

09/11/2008 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 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.