## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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<b>STATEMENT</b>	OF CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>

1	OIVID AFFRO	OIVID AFFROVAL									
	OMB Number:	3235-0287									
	Estimated average burde	n									
	hours per response:	0.5									

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 Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     FLYNN EDWARD L				2. IS TC	2. Issuer Name and Ticker or Trading Symbol TGC INDUSTRIES INC [ TGCI ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last) 7511 MYR	(Firs	,	Middle)			oate of 04/20		Trans	action (Month/Day/Year)						give title	Other (specify below)			
(Street)	LE NY	. 1	1385	4										Individual or Joint/Group Filing (Check Applicabl Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting					
(City)	(Sta	te) (2	Zip)										Person						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Da		Date	t. Transaction Date Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.					5. Amoun Securities Beneficial Owned Fo Reported	i Ily	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) oi (D)	Price	Transaction(s) (Instr. 3 and 4)					
Common S	tock													1,128,342(5)		2 <sup>(5)</sup> D			
Common Stock												261,6	261,684 <sup>(5)</sup>			By pouse <sup>(1)</sup>			
Common Stock													19,9	19,950 <sup>(5)</sup>		I I	By Flynn Meyer PSP&T		
Common Stock												26,250 <sup>(5)</sup>		I		By Flynn Meyer PSP&T			
		٦	Γable II - I									or Bene ble secu		Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,		ansaction of Expode (Instr. Derivative (Mo		6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and Amou of Securities Underlying Deriv. Security (Instr. 3:4)			es g Derivative	8. Price of Derivative Security (Instr. 5) Security General Following Reports Transac (Instr. 4)		ve es Form: ially Direct (D) or Indirect d tition(s)		11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amount or Number of Shares						
Stock Option (reload)	\$6.12 <sup>(5)</sup>								(3)	1	0/10/2010	Common Stock	1,695(5)		1,695 <sup>0</sup>	(5)	D		
Nonqualified Stock Option	\$8.78 <sup>(5)</sup>								(3)	0	9/18/2012	Common Stock	10,466(5)		10,466	5(5)	D		
Nonqualified Stock Option	\$3.24 <sup>(5)</sup>								(3)	1	0/22/2013	Common Stock	23,162(5)		23,162	o(5)	D		
Nonqualified Stock Option	\$4.07	12/04/2009			A		18,987		(2)	1	2/03/2014	Common Stock	18,987	(6)	18,98	37	D		

- 1. Reporting person disclaims beneficial ownership of shares owned by spouse.
- 2. The option vests in two equal installments beginning on 12-04-2009.
- 4. Reporting person disclaims beneficial ownership of the shares owned by Flynn Meyer PSP&T #1 except to the extent of reporting persons pecuniary interest. Reporting person is the plan administrator for Flynn Meyer PSP&T #1.
- 5. Adjusted for the Companys 5% stock dividend paid to all holders of record of common stock on May 12, 2009.
- 6. Not applicable.

Edward L. Flynn

12/08/2009

\*\* 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.