FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

| OMB APPROVAL             |               |  |  |  |  |  |  |
|--------------------------|---------------|--|--|--|--|--|--|
| OMB Number:              | 3235-<br>0104 |  |  |  |  |  |  |
| Estimated average burden |               |  |  |  |  |  |  |
| hours per response:      | 0.5           |  |  |  |  |  |  |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

**SECURITIES** 

| 1. Name and Address of Reporting Person*  Meisel Steven E.   |                       |  | 2. Date of E<br>Requiring S<br>(Month/Day<br>09/07/202 | statement<br>/Year)  | 3. Issuer Name and Ticker or Trading Symbol Sanchez Midstream Partners LP [ SNMP ] |   |   |  |  |  |  |
|--|-----------------------|--|--|--|--|---|---|--|--|--|--|
| (Last)<br>7859 WALI  | (First)<br>NUT HILL I | (Middle)   |  |  | 4. Relationship of Relationship (Check all applicable                              |   | rting Person(s) to                          |  | 5. 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 |  |  |
| SUITE 335  |                       |  |  | X Director Officer (give title below)  | ;  |   | specify 6.                                  |  |  |  |  |
| (Street) DALLAS  | TX                    | 75230  |  |  |  |   |   |  | Form filed by More than One<br>Reporting Person  |  |  |
| (City)   | (State)               | (Zip)  |  |  |  |   |   |  |  |  |  |
| Table I - Non-Derivative Securities Beneficially Owned   |                       |  |  |  |  |   |   |  |  |  |  |
| 1. Title of Security (Instr. 4)  |                       |  | i  | 2. Amount of Securi<br>Beneficially Owned (<br>4)                                |  |   |   | 4. Nature of Indirect Beneficial<br>Ownership (Instr. 5) |  |  |  |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |                       |  |  |  |  |   |   |  |  |  |  |
| ,  |                       | 2. Date Exercisable and Expiration Date (Month/Day/Year) |  | 3. Title and Amount of Securitie<br>Underlying Derivative Security<br>(Instr. 4) |  |   | 4.<br>Conversion<br>or Exercise<br>Price of |  | 6. Nature of Indirect Beneficial Ownership (Instr.   |  |  |
|  |                       | Date<br>Exercisable                                      | Expiration<br>Date                                     | Title  |  | Amount or Derivativ Security Number of Shares |   |  | 5)   |  |  |

**Explanation of Responses:** 

No securities are beneficially owned.

/s/ Steven E. Meisel

09/17/2020

\*\* 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.