FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHI

IL	OND APPRO	VAL				
1	OMB Number:	3235-0287				
E	Estimated average burde	en				
r	nours 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

1. Name and Address of Reporting Person* RIELLY JOHN P			2. Issuer Name and Ticker or Trading Symbol HESS CORP [HES]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
,					\perp									_ ا x	Officer (give title		Other (s	· I
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 03/07/2012									,	below) Senior Vice Pres		below)			
HESS CORPORATION						0772	.012								J			orderit.	
1185 AVE	NUE OF T	HE AMERICAS	5		<u> </u>				0		(1. II (5.	, , , , , , , , , , , , , , , , , , ,		10.			=""	(0)	
(Chroat)				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NEW YO	RK NY	7 :	10036											X	Form file	ed by One	Repoi	rting Persor	
														Form filed by More than One Reporting Person					
(City)	(St	ate) ((Zip)																
		Tal	ole I - Nor	า-Deriv	/ativ	e Se	curities	s Acc	quired,	Disp	osed o	of, or Be	nef	cially	Owned				
Date				Execution Day/Year) if any		xecution Date, T any C		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3,			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) (D)	or 1	Price	Reported Transaction (Instr. 3 ar				(Instr. 4)
Common Stock, \$1.00 par value 03/0			03/07	7/2012			A		14,503 A			\$0.00	155,093 ⁽¹⁾			D			
			Table II -							•		, or Ber ble sec		-	Owned				
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date, 1	Code (Instr				6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amor of Securities Underlying Deriv Security (Instr. 3 4)		ivative	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transact (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				c	Code	v	(A)		Date Exercisabl		xpiration ate	Title		ount or ober of res					
Performance Share	\$0.00	03/07/2012			A		14,503		(3)		(3)	Common Stock, \$1.00 par	29,	006 ⁽²⁾	\$0.00	14,50)3	D	

Explanation of Responses:

- 1. This amount includes 42,833 shares held in escrow pursuant to the Corporation's 2008 Long-Term Incentive Plan and Second Amended and Restated 1995 Long-Term Incentive Plan. The reporting person has only voting power of these shares until lapsing of the period set by the Committee administering the Plan at which time the shares plus accrued dividends will be delivered to the reporting person if he is still an employee of the Corporation.
- 2. Each Performance Share Unit entitles the holder to a payout of shares of Hess common stock equal to between 0% and 200% of such Performance Share Unit depending on the relative performance of the total sharholder return of Hess common stock compared with that of its peers over a three year performance period ending December 31, 2014, as more particularly described in the applicable award agreement.
- 3. Not applicable

Remarks:

<u>George C. Barry for John P. Rielly</u>

03/09/2012

** 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.