FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL							
OMB Number:	3235-0287							
Estimated average burden								
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* COLLINS J BARCLAY						2. Issuer Name and Ticker or Trading Symbol AMERADA HESS CORP [AHC]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
COLLI		X Directo	r 10% Ow		vner																
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year)									- :	X Officer below)	r (give title ')		Other (s below)	specify	
1185 AV	09/	09/09/2005										E	Excutive Vice President								
			- 1	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable							
(Street)			10000		4. "	AIIIC	iluillei	ii, Date	UI C	Jilgiliai i	iicu	(IVIOITIII)D	ay/ rear)		Line	e)	·			.	
NEW YO	ORK N	Y	10036													X Form filed by One Reporting Person					
(City)	(S	tate)	(Zip)			Form filed by More than One Rep Person											n One Repo	rting			
		Tab	le I - No	n-Deriv	ative	e Sec	curiti	ies Ad	qu	ired, I	Disp	osed c	of, or E	ene	ficial	y Owned	t				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transac Code (II 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)					es ially Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Ī	Code	v	Amount	(A) or (D) Pr		Price	Reporte Transac (Instr. 3	tion(s)				
Common	9/2005	2005				M ⁽¹⁾		1,000 A			\$64.7	5 116	5,501		D						
Common	Stock, \$1.0	00 par value		09/09	9/2005	5				S		1,000) [)	\$137	115	,501 ⁽²⁾	D			
		7	able II -	Derivat (e.g., p												Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transa Code (1 8)				Exp	Date Exe piration onth/Day	Date		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y C F D o (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat	te ercisable		xpiration ate	Title	or Nu of	ımber						
Option to purchase common	\$64.75	09/09/2005			М			1,000	12	2/18/1996	12	2/18/2005	Commo Stock, \$1.00 pa	1	,000	\$0	4,000		D		

Explanation of Responses:

- 1. Common stock acquired upon exercise of options granted under the Issuer's Second Amended and Restated 1995 Long-Term Incentive Plan.
- 2. This amount includes 87,000 shares held in escrow pursuant to the Corporation's Second Amended and Restated 1995 Long-Term Incentive Plan. The reporting person has only voting pow3e3r of these shares until the lapsing of the period set by the Committee adminiserking the plan which time the shares plus accrued dividends will be delivered to the reporting person if he is still an employee of the Corporation.

George C. Barry for J.B. Collins

09/12/2005

** 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.