FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	OVAL				
	OMB Number:	3235-0287				
l	Estimated average burd	en				
l	hours per response:	0.5				

	Check this box if no longer subject to
٦.	Section 16. Form 4 or Form 5 obligations may continue. See
J	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*  CAPTMAN JOHN A							2. Issuer Name and Ticker or Trading Symbol HESS CORP [ HES ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>GARTMAN JOHN A</u>						TIES SOIL [ IIIS ]										Direc	ctor	10%	Owner		
							Date of Earliest Transaction (Month/Day/Year)									Office belov	er (give title v)	Othe belo	r (specify w)		
(Last) (First) (Middle) HESS CORPORATION							06/04/2007								Senior Vice President						
1185 AVENUE OF THE AMERICAS						A KANANA MANANA BANA KANANA										C. Ladi idaalaa laintoona Eiliaa (Ohada L. L. L.					
					-   4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NEW YORK NY 10036																X Form filed by One Reporting Person					
					-											Form filed by More than One Reporting Person					
(City)	(5	State)	(Zip)																		
		Tab	le I - Noi	n-Deriv	/ative	Se	curitie	es Acc	quired,	Dis	posed o	f, o	r Ben	efici	ally C	Owne	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (Approximation Disposed Of (D) (Instr. 3) 5)					4 and Se		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										v	Amount		(A) or (D)	Price	. 1	Reported Transaction(s) (Instr. 3 and 4)			(111501.4)		
Common Stock, \$1.00 par value 06/04/						/2007					4,172	2	D	\$60	.58	3 44,128 <sup>(2)</sup>		D			
		Ta									sed of, onvertib				y Ow	/ned					
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, Transac Code (In			n of Deriv Secu Acqu (A) o Disp of (D	of I		xercis on Dat Day/Ye		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Pri Deriv Secui (Instr	ative rity	9. Number or derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nui of	ount mber ares							

## **Explanation of Responses:**

- 1. Shares sold to satisfy tax withholding on vesting of shares of restricted stock
- 2. This amount includes 30,300 shares held in escrow pursuant to the Corporation's 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.

## Remarks:

<u>George C. Barry for John A.</u> Gartman

06/06/2007

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.