FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL				
	OMB Number:	3235-0287				
l	Estimated average burd	en				
l	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

											· ·								
1. Name and Address of Reporting Person* <u>HECK SCOTT M</u>						2. Issuer Name and Ticker or Trading Symbol AMERADA HESS CORP [ AHC ]									k all appli Directo	all applicable) Director		ng Person(s) to Issuer 10% Owner Other (specify	
	(First) (Middle)  AMERADA HESS CORPORATION  AVENUE OF THE AMERICAS						3. Date of Earliest Transaction (Month/Day/Year) 02/01/2006									Officer (give title below)  Senior Vice President			specify
(Street) NEW YORK NY 10036				4. 11	4. 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     Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)											Person					
		Tab	le I - Nor	ı-Deriv	ative	e Se	curitie	s Ac	cquired,	Disp	osed o	of, or B	enefic	ially	Owned	l			
1. Title of Security (Instr. 3)  2. Transa Date (Month/L						ear)	2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			4 and Securit		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code			v	Amount		(A) or (D) Price		Transaci (Instr. 3	tion(s)			(111511.4)	
Common	Stock, \$1.0	00 par value	1/200	/2006			A		4,00	00 A		\$0	19,4	19,471(1)		D			
		T	able II - I						uired, D s, option						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemec Execution I if any (Month/Day	d Date,	4. Transa Code ( 8)	ection	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisal Expiration Date (Month/Day/Year		ble and	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8 D S	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Own For Dire or li (I) (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		opiration	Title	Amou or Numb of Share	er					
Option to purchase Common Stock	\$148.66	02/01/2006			A		4,000		02/01/200	7 02	2/01/2016	Common Stock, \$1.00 pa value	1 4 00	0	\$0	4,000		D	
Option to purchase Common Stock	\$148.66	02/01/2006			A		4,000		02/01/200	8 02	2/01/2016	Common Stock, \$1.00 pa value	1 4 00	0	\$0	4,000		D	
Option to purchase Common Stock	\$148.66	02/01/2006			A		4,000		02/01/200	9 02	2/01/2016	Common Stock, \$1.00 pa value	1 4 00	0	\$0	4,000		D	

## **Explanation of Responses:**

1. This amount includes 18,000 shares held in escrow pursuant to the Corporation's Second Amended and Restated 1995 Long-Term Incentive Plan. The reporting person has only voting power of these shares until the 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

<u>George C. Barry for Scott M.</u> <u>Heck</u>

02/03/2006

\*\* 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.