FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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] | | | | | | | | | | olicable) | ng Person(s) to | Issuer Owner |
|--|--|--------------------------|--|---|--|---|---|--|--|---|--------|-----------------------------|---|--|---|--------------------------------|--|---|
| (Last) | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/06/2012 | | | | | | | | Offic | , | Othe belov ce President | r (specify v) |
| 1185 AVENUE OF THE AMERICAS | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) NEW YO (City) | | K NY 10036 (State) (Zip) | | | | | | | | | | | | X | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye | | | | | n 2/ Ex 'ear) if | 2A. Deemed Execution Date, | | | 3. 4. Securities Disposed Of Code (Instr. 8) | | | s Acqui | red (A) o | or 5. Am | | nount of rities ficially | 6. Ownership Form: Direct (D) or Indirect (I) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Repo Trans | | (Instr. 4) | (Instr. 4) |
| Common Stock, \$1.00 par value 03/06/201 | | | | | | 2 | | | S ⁽¹⁾ | | 7,622 | D | \$63.0 | 3.0808 | | 0,590(2) | D | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| Derivative Conversion Date Execu Security or Exercise (Month/Day/Year) if any | | | | ransaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, and 5) | | ative rities ired osed | Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Shares | | of Deri Secu (Inst | 3. Price of Operivative Security Beneficia Owned Followin Reported Transacti (Instr. 4) | | Ownership Form: Direct (D) or Indirec (I) (Instr. 4) | Beneficial Ownership | | |

Explanation of Responses:

- 1. Shares sold to satisfy tax withholding on vesting of shares of restricted stock.
- 2. This amount includes 28,330 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.

Remarks:

George C. Barry for John P. Rielly

03/07/2012

**

** 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.