## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasnington,	D.C.	20549	

STATEMENT OF CHA	NGES IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: 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

1. Name and Address of Reporting Person*  HESS JOHN B						2. Issuer Name <b>and</b> Ticker or Trading Symbol HESS CORP [ HES ]									5. Relationship of Reporting Person(s) to Iss (Check all applicable) X Director X 10% Or						
(Last) (First) (Middle) HESS CORPORATION 1185 AVENUE OF THE AMERICAS						3. Date of Earliest Transaction (Month/Day/Year) 09/10/2010									X	belov	,	e Boa	Other (specify below)		
(Street)  NEW YO  (City)			10036 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								i. Indiv ine) X	Forn Forn	or Joint/Group Filing (Check Applicable form filed by One Reporting Person form filed by More than One Reporting forson					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution Date,		Transaction Disposed Code (Instr. 5)			ities Acquired (A) d Of (D) (Instr. 3,			4 and Secu Bene Own		urities eficially ed Following		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
										Code	v	Amount (A) or (D)			Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock, \$1.00 par value 09/10/2					/2010		J <sup>(1)</sup>		229,331		D	\$0.00		270,669 <sup>(2)</sup>			I	See Note 2			
Common Stock, \$1.00 par value 09/10/3					/2010			J <sup>(1)</sup>		229,331 A		A	\$0	.00	00 687,433 <sup>(3)</sup>			D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	vative conversion or Exercise Price of Derivative Security  Date (Month/Day/Year)  Execution Date, if any (Month/Day/Year)		4. Transa Code (1 8)		str. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ve (es d	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares		ount mber			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	F C C	.0. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

- 1. Distributed from a previously reported trust referred to in Note 2. This transaction represents a change only in the nature of beneficial ownership.
- 2. Held by a previously reported trust established for the benefit of the reporting person. The reporting person is the trustee of the trust.
- 3. This amount includes 268,780 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 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.

## Remarks:

George C. Barry for John B. Hess

09/13/2010

\*\* 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.