FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

0.0.07.11	
OMB Number:	3235-028
Estimated average	burden

Check this box if no longer subject to	u
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(h)	

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

l	OMB APPRO	IVAL						
l	OMB Number:	3235-0287						
Estimated average burden								
l	hours per response:	0.5						

Name and Address of Reporting Person* SCELFO JOHN J					2. Issuer Name and Ticker or Trading Symbol HESS CORP [HES]									(Che	eck all applic	ationship of Reporting k all applicable) Director Officer (give title		son(s) to Iss 10% Ov Other (s	vner	
(Last) (First) (Middle) HESS CORPORATION						3. Date of Earliest Transaction (Month/Day/Year) 02/04/2011								7	below)	below) Senior Vice President				
1185 AVENUE OF THE AMERICAS					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street) NEW YORK NY 10036					,										Form filed by One Reporting Person Form filed by More than One Reporting Person				- 1	
(City)	(S	State)	(Zip)																	
		Tak	ole I - Nor	n-Deriv	ative	Se	curit	ies Ac	quired,	Dis	osed o	f, or	Bene	eficiall	y Owned	l				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			Securitie Benefici	5. Amount of Securities Beneficially Owned Following		vnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(1	A) or D)	Price	Transac (Instr. 3	tion(s)			(111501.4)		
Common	Stock, \$1.0	00 par value		02/04	4/2011				M ⁽¹⁾		10,00	0	Α	\$53.2	98	8,650		D		
Common Stock, \$1.00 par value				02/04	4/2011			S		10,00	0	D	\$82.4		3,650 ⁽²⁾		D			
		-	Table II -								sed of, onverti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date, T	ransaction Code (Instr.				6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Co	Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	0 N 0	imount or lumber if shares						
Option to purchase Common	\$53.2	02/04/2011			M			10,000	02/07/200	0 88	2/07/2017	Comm Stock	k, 1	.0,000	\$0.00	9,000)	D		

Explanation of Responses:

- 1. Common Stock acquired upon exercise of options granted under the Corporation's Second Amended and Restated 1995 Long-Term Incentive Plan.
- 2. This amount includes 69,070 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 J. 02/07/2011 <u>Scelf</u>o

** 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.