FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OIVID AFF	ROVAL
OMB Number:	3235-0287
Estimated average	burden

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

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

1. Name and Address of Reporting Person*  Vogel Robert J					2. Issuer Name <b>and</b> Ticker or Trading Symbol HESS CORP [ AHC ]									(Che	eck all appli Directo	icable) or		erson(s) to Issuer  10% Owner  Other (specify		
(Last) 1185 AV	,	irst) THE AMERICA	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/08/2006									below)	Officer (give title below)  Vice President & Treasurer				
(Street)  NEW YO			10036 (Zip)		4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Y Form	rividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City)				n-Deriv	/ative	e Se	curiti	ies Ac	quired	, Dis	posed o	of, or	r Ben	eficiall	y Owned					
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Y		tion 2/ Ex y/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		I (A) or	5. Amou Securiti Benefic Owned	int of es ially Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common	Common Stock,\$1.00 par value 12/0					2006		M <sup>(1)</sup>		4,500	0	A	\$20.5	9 32	32,400		D			
Common	ommon Stock, \$1.00 par value 12/08/					2006		S		4,500 D		\$52.1	27,	27,900(2)		D				
		T	able II -								osed of converti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		n of l		6. Date Exercisa Expiration Date (Month/Day/Yea		!	Amo Secu Unde Deriv	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	ly	10. 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	1	Amount or Number of Shares						
Option to purchase	\$20.59	12/08/2006			M			4,500	02/06/20	06 0	2/06/2012	Com Sto	ck,	4,500	\$0	0		D		

## **Explanation of Responses:**

stock

- 1. Common Stock acquired upon exercise of options granted under the Issuer's Second Amended and Restated 1995 Long-Term Incentive Plan
- 2. These shares are 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 and accrued dividends will be delivered to the reporting person if he is still an employee of the Corporation.

George C. Barry for Robert J.

12/11/2006

Vogel

value

\*\* 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.