Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>
• =	0. 0		• • • • • • • • • • • • • • • • • • • •

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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 and Ticker or Trading Symbol HESS CORP [ HES ]										lationship o ck all applic Directo	able)	g Pers	son(s) to Iss	
	Last) (First) (Middle) HESS CORPORATION 185 AVENUE OF THE AMERICAS					3. Date of Earliest Transaction (Month/Day/Year) 08/03/2007									X	below)		e Boa	Other (s below) ard and CE	·
(Street)  NEW Y(			10036 (Zip)		4. 1	If Ame	ndme	nt, Date	of Orig	nal Fil	ed (	(Month/Da	ay/Year)		6. Inc Line)	Form fi	led by One led by Mor	e Repo	g (Check Apporting Person orting Person	n
		Tab	le I - Noi	n-Deri	vativ	e Se	curit	ties Ac	quire	d, Di	isp	osed o	f, or Be	enefic	cially	Owned				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		ear) i	2A. Deemed Execution Date, if any (Month/Day/Year)		Co	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securitie Benefici Owned F		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct or Indirect onstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Со	de V		Amount	(A) (D)	or Pri	ce	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)
Common Stock, \$1.00 par value			08/0	3/200	/2007				1)		30,000	0 A	\$	17.67	1,681,570			D		
Common Stock, \$1.00 par value			08/0	3/200	3/2007				2)		29,90	0 D		\$60	1,651,670			D		
Common Stock, \$1.00 par value 08			08/0	3/200	2007			5			100	D	\$	50.03	1,651,570 <sup>(3)</sup>			D		
		-	Гable II -									sed of, onvertil				Owned				
Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any		3A. Deeme Execution if any (Month/Day	Date,	Code (Instr		n of		Expira	6. Date Exercisi Expiration Date (Month/Day/Yea		of Securities			8. Price of Derivative Security (Instr. 5)	9. Number o derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	s Silly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	sable		Expiration Date	Title	Amo or Num of Shai	ber					
Option to purchase Common	\$17.67	08/03/2007			M			30,000	01/05	/1999	01	1/05/2008	Common Stock, \$1.00 par	30.0	000	\$0.00	135,00	0	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. The sales of shares set forth herein are made in connection with a selling plan dated July 30, 2007 that is intended to comply with Rule 10b5-1(c).
- 3. This amount includes 595,000 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.

## Remarks:

George C. Barry for John B.

08/07/2007

Hess

\*\* 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.