FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## Washington, D.O. 20040

	OMB APP	PROVAL
IAI OWNERSHIP	OMB Number:	3235-0287

OMB Number:	3235-0287
Estimated average bu	ırden
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

Name and Address of Reporting Person*     Williams Mark R.					2. Issuer Name and Ticker or Trading Symbol HESS CORP [ HES ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
, villian	IS IVIGIR I	<u>.                                    </u>			3.0	Date of Earliest Transaction (Month/Day/Year)							+		er (give title		(specify	
(Last) (First) (Middle) 1185 AVENUE OF THE AMERICAS						03/11/2015									belo	N)	below	)
(Street)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Lin	e)				
NEW YO			.0036												Form filed by More than One Reporting Person			
(City)	(51		<sup>Zip)</sup> <b>e I - Nor</b>	-Deriv	ative	Sec	curitie	s Arc	nuired	Dis	nosed o	f or F	Sene	ficial	ly Own	2d		
		1451	C 1 - 1101	I-DCIIV	ative		caritic	3 700	Tuncu,	013					ly Own	-u	1	
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				Secur Benef Owne	ities Ficially (I d Following (I	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount (A) or (D)		) or )	Price		action(s) 3 and 4)		(Instr. 4)
Common Stock, \$1.00 par value 03/11				/2015	2015		P		7,300 A S		\$69.5	51 2	5,428	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		3A. Deeme Execution if any (Month/Da	Date, Transaction Code (Instr			on of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		tr. 3	8. Price of Derivative Security Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Num of Shar	ber				

Explanation of Responses:

Remarks:

<u>George C. Barry for Mark</u> <u>Williams</u>

03/12/2015

\*\* Signature of Reporting Person

Date

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$ 

- $^{\star}$  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.