FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB APPROVAL OMB Number: 3235-

OMB Number:	3235-0287						
Estimated average burd	len						
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* REILLY WILLIAM K						2. Issuer Name and Ticker or Trading Symbol CONOCOPHILLIPS [COP]									Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Own						
															X		tor er (give title			wner (specify	
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 12/31/2004									below)			below)		
600 NORTH DAIRY ASHFORD																					
,					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)			77070			''									filed by One	d by One Reporting Person					
HOUSTON TX			77079												Form	orting					
(City) (State) (Zip)																					
		Tabl	e I - Noi	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Ben	eficia	lly C)wne	:d				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Executi ay/Year) if any				Code (Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			4 and Secu Bene Own		cially I Following	Form:	nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		A) or D)	Price		Transa	ransaction(s) nstr. 3 and 4)			(msu. 4)	
Common Stock 12/31/2							2004		A		87	87		\$86.	77 6,578		5,578		D		
		Та									sed of, onvertib				/ Ow	ned					
1. Title of Derivative Security (Instr. 3)				n Date,	4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) on Dispo of (D) (Instrand 5	ative rities ired osed . 3, 4	Expiratio (Month/D	Date Expiration Expiration Date Month/Day/Year) Date Expiration Exercisable Date			or	ount nber	nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		vnership rm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

Remarks:

Michael A. Gist, Attorney-in-Fact (Power of Attorney filed with the Commission on 02/10/2004)

01/04/2005

** 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.