FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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OMB APP	ROVAL							
OMB Number:	3235-0287							
Estimated average burden								
hours por 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* MCGRAW HAROLD III					2. Issuer Name and Ticker or Trading Symbol CONOCOPHILLIPS [COP]									ck all appli	,				
(Last) (First) (Middle) 600 NORTH DAIRY ASHFORD					3. Date of Earliest Transaction (Month/Day/Year) 01/15/2006									Officer below)	(give title		Other (s below)	specify	
(Street) HOUST(77079 Zip)		4. If	f Ame	endment,	Date	of Original	Filed	(Month/D	ay/Year)		6. Inc Line)	Form	iled by One	Rep	g (Check Ap orting Perso n One Repo	n
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,			Transaction Dispose Code (Instr. 5)		ities Acquii d Of (D) (In:			5. Amou Securition Benefici Owned I Reporte	es Formially (D) (Following (I) (II)		n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)		ice	Transac (Instr. 3	ction(s)			` '	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Conversion Date Execution Date, T				4. Transa Code (1 3)		5. Num of Derivat Securit Acquir (A) or Dispos of (D) (Instr. 3 and 5)	tive ties ed sed	Expiration	6. Date Exercisable and Expiration Date (Month/Day/Year)			d f 6 g g Secui nd 4)		3. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				C	Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amo or Num of Shar	ber					
Stock Units	(1)	01/15/2006			A		1,649		(2)		(2)	Common Stock	1,6	49	\$0	2,060		D	

Explanation of Responses:

1. 1-for-1

2. The reporting person has elected to receive payment as a lump sum upon his termination of service, which election may be changed by the reporting person to provide for deferred payments.

Remarks:

Michael A. Gist, Attorney-in-Fact (Power of Attorney filed with the Commission on 09/12/2005)

01/26/2006

Date

** Signature of Reporting Person

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.