FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| 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] | | | | | | | | | ck all ap _l | , | | | |
|--|--|--|---|---------|---|--|--|-------|--|--------|--------------------|---|---|---|--|----------------------|---|--|
| (Last) (First) (Middle) 600 NORTH DAIRY ASHFORD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/31/2004 | | | | | | | | | | Offic belo | er (give title w) | Other below | (specify) |
| (Street) HOUSTON TX 77079 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. In Line | | | | |
| | | Tabl | e I - Nor | -Deriva | ative | Sec | curitie | s Acc | quired, | Dis | posed o | f, or I | Bene | ficiall | / Own | ed | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | Execution Date, | | 3. Transaction Code (Instr. 3) 8) 4. Securities Acquired (ADisposed Of (D) (Instr. 3) 5) | | | | Secur Benef | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | Code | v | Amount | (A (D |) or) | Price | Trans | action(s) 3 and 4) | | (Instr. 4) | |
| Common Stock 08/3 | | | | | /2004 | | A | | 102 | A \$7 | | \$73.84 | | 6,189 | D | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| 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. Transactio Code (Inst | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | De Se (Ir | Price of erivative ecurity estr. 5) | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | | Date Exercisa | | Expiration Date | Title | Amo or Num of Shar | ber | | | | |

Explanation of Responses:

Remarks:

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

09/02/2004

** 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.