### FORM 5

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

Machinaton	$D \subset$	20540
Washington,	D.C.	20549

# **ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

OMB APPRO	DVAL						
OMB Number:	3235-0362						
Estimated average burden							
hours per response:	1.0						

T Form 2 Holdings Poported

Instruction 1(b)

_	riolalitys Repo		ı	Filed pursuant t	n Secti	on 16(a	) of the Secu	ities Ev	change	Act o	f 1934		L			<u>.</u>	
Form 4	Transactions R	eported.	'				Investment C				1 1954						
1. Name and Address of Reporting Person* <u>CARRIG JOHN A</u>					2. Issuer Name and Ticker or Trading Symbol CONOCOPHILLIPS [ COP ]						Office of Colors Aids				Owner		
(Last) 600 NOR	(Fir TH DAIRY	st) ASHFORD	(Middle)		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2006						ear)	X Officer (give title below) Other (specify below)  Executive Vice President					
(Street) HOUSTO			77079	4. If Ame	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(City) (State) (Zip)																
			ole I - Non-Dei					•									
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Dat if any	e, Tr	3. Transaction Code (Instr. 8)	on Of (D) (In					5. Amount o Securities Beneficially		6. Ownersh Form: Di	ip Indi rect Owr	7. Nature of Indirect Beneficial Ownership (Instr.		
				(Month/Day/Ye		ear)   8)	Amount		(A) or (D)	Pric	e	Owned at er Issuer's Fisc Year (Instr. 3 4)	cal	(D) or Indirect ( (Instr. 4)	(1)	4)	
Common	Stock		07/14/2006			W	839.	13	D		\$0	142,993	.87	D			
Common Stock		07/14/2006			W	839.	839.13			\$0 839.13		3	I		By Trust <sup>(1)</sup>		
Common Stock		07/14/2006		W		73.5	8	D		\$0	142,920.29		D				
Common	Stock		07/14/2006			W	73.5	8	A		\$0	73.58	3	I	By Trust <sup>(2)</sup>		
Common	nmon Stock 07/14/2006					W	2,676.39		D	\$0		140,243.9		D			
Common	Stock		07/14/2006 W 2,676.39 A \$0 2,676.39 I		By	Trust <sup>(3)</sup>											
Common Stock											73,280 <sup>(4)</sup>		I		nocoPhillips ings Plan		
	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)  3. Deemed Execution Date, if any (Month/Day/Year)  (Month/Day/Year)  3. Deemed Execution Date, if any (Month/Day/Year)  (Month/Day/Year)  5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration D	or			t of ies ving ive y (Instr. 3	8. Price of Derivative Security (Instr. 5)	deriva Secur Benef Owne Follov Repor Trans	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)							
				(A)	(D)	Date Evercisable	ate Expira		Title	Number of Shares							

### **Explanation of Responses:**

- $1. \ The \ shares \ are \ held \ in \ a \ by pass \ trust \ of \ which \ the \ reporting \ person \ serves \ as \ trustee.$
- 2. The shares are held in a QTIP exempt trust of which the reporting person serves as trustee.
- 3. The shares are held in a marital trust of which the reporting person serves as trustee.
- 4. These shares were inadvertently not included in Table I of the reporting person's prior reports.

## Remarks:

Michael A. Gist, Attorney-in-Fact (Power of Attorney filed with the Commission on 01/22/07)

02/14/2007

Date

\*\* Signature of Reporting Person 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.