FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL
OMB Number: 3235-0287
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	ions may contir tion 1(b).	lue. See		Filed							es Exchang Ipany Act o		1934			hours p	per respo	onse:	0.5		
1. Name and Address of Reporting Person* HEINEMANN ROBERT																5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) C/O BERRY PETROLEUM COMPANY					3. Date of Earliest Transaction (Month/Day/Year) 03/31/2005									X Officer (give title Other (specify below) below) President and CEO							
5201 TRUXTUN AVE., SUITE 300 (Street) BAKERSFIELD CA 93309					Line) X F										Form file	lual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)																					
			ble I - Non						iired,	Disp		-		-	1						
Date				2. Transa Date (Month/D			2A. Deemed Execution Date, if any (Month/Day/Year		te, Transact Code (In			ties Acquired (A) or d Of (D) (Instr. 3, 4 an			5. Amount Securities Beneficial Owned Fo Reported	ly	Form: Direct (D) or Indirect (I) (Instr. 4)		. Nature of ndirect Beneficial Ownership Instr. 4)		
									Code	v	Amount	(A) ((D)	Pr Pr	ice	Transactio (Instr. 3 ar			`			
Class A Common Stock															0		Ι				
Class A Common Stock 03/31.				03/31/2	′2005 ⁽⁵⁾			J		v	416(5)) A		60 ⁽⁵⁾	745		I 4		Held in 101(k) Plan		
			Table II - I (sed of, onvertit				wned						
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Descurity or Exercise (Month/Day/Year) if any			ate, Transact Code (In				6. Date Exercisable and Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e C S F Ily I J (LO. Dwnership Form: Direct (D) Dr Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Cod			Date Exerc	te Expiration ercisable Date		Title	Amo or Num of Sh	ber									
Phantom Stock Units ⁽²⁾⁽³⁾	\$0 ⁽¹⁾	03/31/2005		A		3		08/08	/1988 ⁽²⁾	08/0	08/1988 ⁽³⁾	Class A Common Stock	3	3	\$51.45	1,485	5	D			
Non- Statutory Stock Option (NSO) ⁽⁴⁾	\$16.14							12/0	2/2002	12	/02/2012	Class A Common Stock	5,0	00		5,000)	D			
Non- Statutory Stock Option (NSO) ⁽⁴⁾	\$19.22							12/0	2/2003	12	/02/2013	Class A Common Stock	5,0	00		5,000)	D			
Non- Statutory Stock Option	\$28.75							06/1	6/2005	06	/16/2014	Class A Common Stock	100	,000		100,00	00	D			
(NSO) ⁽⁴⁾																					

Explanation of Responses:

1. 1 for 1

2. Phantom Stock Units acquired under the Company's Non-Employee Director Deferred Stock and Compensation Plan in a transaction exempt under Rule 16b-3(c). Shares are exercisable under the terms of the Plan upon resignation from the Board.

3. Phantom Stock Units acquired under the Company's Non-Employee Director Deferred Stock and Compensation Plan in a transaction exempt under Rule 16b-3(c). Shares expire under the terms of the Plan upon resignation from the Board.

4. NSO - Right to buy Berry Petroleum Company Class A Common Stock

5. Between January 1, 2005 and March 31, 2005 the reporting person acquired the shares of Berry Petroleum Company Common Stock in the Company's 401(k) Plan. All transactions were at market value and were non-discretionary.

Remarks:

Kenneth A. Olson under POA for Robert F. Heinemann

04/04/2005

** 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.