FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL

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	Secti	on 30(h) of th	e Inve	stment	Com	pany Act	of 1940								
1. Name and Address of Reporting Person* <u>Ciotti George W</u>						2. Issuer Name and Ticker or Trading Symbol BERRY PETROLEUM CO [BRY]										ck all applic Directo	or 10% Owner			wner	
(Last) (First) (Middle) 1999 BROADWAY, SUITE 3700					3. Date of Earliest Transaction (Month/Day/Year) 09/30/2011										X Officer (give title Other (sp. below) VP of Corp Development					ъреспу 	
(Street)	R C	CO 80202			4. If	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					
(City)	(S	rate) (Zip)														Person					
		Tab	le I - Nor	ı-Deri	vative	e Se	curiti	es A	cqui	red, [Disp	osed o	f, or B	enef	icially	/ Owned	I				
			2. Transaction Date (Month/Day/Year)		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		te,	Transaction Dis		Disposed	Securities Acquired (A) sposed Of (D) (Instr. 3, 4			5. Amou Securitie Benefici Owned F Reporte	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	mount (A) o		Price	Transaci (Instr. 3	tion(s)					
Class A (Common St	ock														5,	261	D			
Class A Common Stock 09/30					80/201	/2011				J		497 ⁽³	(3) A		\$0	2,	2,255		I	Held in 401(k) account	
		-	Γable II - I									sed of, onvertil				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemee Execution I if any (Month/Day	Date,	4. Transactior Code (Instr 8)		n of Ex		Expi	Date Exercisal kpiration Date Ionth/Day/Year)		Amoun Securit Underly		nt of ties ying tive Security		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exer	cisable		epiration ate	Title	or Nui of	ount mber ares						
2008 Restricted Stock Units ⁽¹⁾	\$0								12/11	1/2009 ⁽²) 12	2/11/2018	Class A Common Stock	3,	250		3,250)	D		
2009 Restricted Stock Units ⁽¹⁾	\$0								12/11	1/2010 ⁽²) 12	2/11/2019	Class A Common Stock	5,	599		5,599		D		
Perf Based RSUs 3- 16-10	\$0								12/3	31/2012	12	2/31/2012	Class A Common Stock		633		5,633		D		
March 2011 Employee RSU Grant	\$0								03/0)2/2012	03	3/02/2021	Class A Common Stock	4,	021		4,021		D		
Non- Statutory Stock Option 3- 3-2011 - \$48.50	\$48.5								03/0	02/2012	03	3/02/2021	Class A Common Stock		615		4,615	,	D		
Perf Based RSU 3-2-	\$0								12/3	31/2013	03	3/02/2021	Class A		518		3,518		D		

Explanation of Responses:

- 1. 1 for 1
- 2. Restricted Stock Units vest 25% per year from date of grant.
- 3. Shares of Common Stock acquired by the reporting person in the Company's 401(k) Plan. All transactions were at market and were non-discretionary.

Kenneth A. Olson Under POA for George W. Ciotti

10/03/2011

** 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.