FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington.	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

C Form 3 F	Holdings Report	het		OWNERSHIP											hours per response: 1.0				
_	Fransactions Re		File	ed pursuant to															
1. Name and	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol BERRY PETROLEUM CO [BRY]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner											
(Last) (First) (Middle) C/O BERRY PETROLEUM COMPANY 5201 TRUXTUN AVE., SUITE 300				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2003								X Officer (give title Other (specify below) Vice President of Production				v)			
(Street)	FIELD CA	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person								
		Table	e I - Non-Deriv	ative Secu	uritie	es Ac	auire	ed. Di	sposed	of. or	Benefi	ciall	v Owned	1					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) or Dis Of (D) (Instr. 3, 4 and 5)					of ly end of	6. Owner Form: (D) or	ship Direct	7. Nature of Indirect Beneficial Ownership				
				(,		5,		Amount		(A) or (D)	(A) or (D) Price		Issuer's Fi Year (Instr 4)				(Instr. 4)		
Class A Co	ommon Stoo	ck	12/31/2003(1)			J		4	44 ⁽¹⁾	A \$		[1)	483(1)]		Held in 401(k) Plar		
		Та	able II - Deriva (e.g., p	tive Secur outs, calls,									Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) o Disp of (D	ivative surities quired or posed D) str. 3, 4		ate Exercisable and ration Date nth/Day/Year)		Amou Secur Under Deriva	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reporter Transact (Instr. 4)	re es ally ng d tion(s)	10. Owners Form: Direct (I or Indire (I) (Instr	Benefici Ownersl ect (Instr. 4)		
					(A)	(D)	Date Exerc	isable	Expiration Date	Title	or Nur of	ount mber ares							
Nonstatutory Stock Option (Right to Buy) NSO	\$12.5						12/04	12/04/1999 12/04/2008 Co		Class Comn Stoc	on 30	,000,		30,000		D			
Nonstatutory Stock Option (Right to Buy) NSO	\$15.69						12/02	2/2001	12/02/201	Class Comn Stoc	on 20	,000		20,0	00	D			
Nonstatutory Stock Option (Right to Buy) NSO	\$16.3						12/07	7/2002	12/07/201	Class Comn Stoc	on 20	,000		20,0	00	D			
Nonstatutory Stock Option (Right to Buy) NSO	\$16.5						12/06	5/2003	12/06/201	Class Comn Stoc	on 15	,000		15,0	00	D			
Nonstatutory Stock Option (Right to Buy) NSO	\$19.94						12/05	5/2004	12/05/201	Class Comn Stoc	on 20	,000		20,0	00	D			

Explanation of Responses:

1. Between January 1 and December 31, 2003, the reporting person acquired 444 shares of Berry Petroleum Company common stock under the Berry 401(k) plan. Purchases were non-discretionary and at market value. The information in this report is based on a plan statement dated as of December 31, 2003.

Remarks:

Kenneth A. Olson under Power of Attorney on file

01/08/2004

** 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.	