

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF NEW MEXICO

UNITED STATES OF AMERICA)	
and)	
STATE OF NEW MEXICO, <i>ex rel.</i> STATE)	
ENGINEER,)	
)	
Plaintiffs,)	
)	No. 01cv00072 BB-ACE
and)	
)	ZUNI RIVER BASIN
ZUNI INDIAN TRIBE, NAVAJO NATION,)	ADJUDICATION
)	
Plaintiffs in Intervention,)	
)	
v.)	
)	
A & R PRODUCTIONS, et al.)	
)	
Defendants.)	
_____)	

PROOF OF SERVICE

The United States of America (“United States”) hereby states that pursuant to Fed. R. Civ. P. 4(e)(1) and the New Mexico Rules of Civil Procedure 1-0004(E)(3) the following defendant was served with process in the above-captioned matter. Service was made by certified mail (restricted delivery) addressed to the defendant. A copy of the defendant’s signed receipt, date stamped by the U.S. Postal Service on October 19, 2006, is attached as Exhibit 1.

Ranchers State Bank of Belen, ZRB-1-0109

Respectfully submitted this 26th day of June 2007.

Electronically Filed

/s/ Bradley S. Bridgewater

BRADLEY S. BRIDGEWATER

U.S. Department of Justice

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COUNSEL FOR THE UNITED STATES

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that, on June 26, 2007, I filed the foregoing *Proof of Service* electronically through the CM/ECF system, which caused the following parties or counsel to be served by electronic means, as more fully reflected on the Notice of Electronic Filing:

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I further certify that a copy of the foregoing was served by first class mail on each of the parties set forth below, this 26th day of June 2007.

Ranchers State Bank of Belen
P.O. Box 545
Belen, NM 87002

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ranchers State Bank of Belen
 P.O. Box 545
 Belen, NM 87002

2. Article Number
(Transfer from service label)

7006 0810 0000 8086 3085

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Robert Perez*

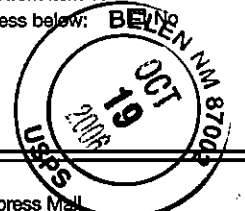
- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

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If YES, enter delivery address below:



3. Service Type

- Certified Mail
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4. Restricted Delivery? (Extra Fee)

Yes