

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
and	)	
	)	ZUNI RIVER BASIN
ZUNI INDIAN TRIBE, NAVAJO NATION,	)	ADJUDICATION
	)	
Plaintiffs in Intervention,	)	
	)	
v.	)	
	)	
A & R PRODUCTIONS, et al.	)	
	)	
Defendants.	)	
_____	)	

NOTICE OF FILING PROOF OF SERVICE OF SUMMONS

The United States of America (“United States”) hereby states that pursuant to Fed. R. Civ. P. 4(e) the following defendants were served with process in the above-captioned matter.

<u>Defendant</u>	<u>Subfile No.</u>	<u>Date of Service</u>
Deborah Faulkner	ZRB-1-0192	February 25, 2011
Dolores Kates	ZRB-1-0192	February 25, 2011
Linda Murphy	ZRB-4-0451	February 25, 2011

Dated: March 30, 2011

Electronically Filed

/s/ Bradley S. Bridgewater

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BRADLEY S. BRIDGEWATER

U.S. Department of Justice  
1961 Stout Street - 8<sup>th</sup> Floor  
Denver, CO 80294  
(303) 844-1359

COUNSEL FOR THE UNITED STATES

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that, on March 30, 2011, I filed the foregoing Notice of Filing Proof of Service of Summons electronically through the CM/ECF system, which caused CM/ECF participants to be served by electronic means, as more fully reflected on the Notice of Electronic Filing.

\_\_\_\_\_/s/\_\_\_\_\_  
Bradley S. Bridgewater

AO 440 (Rev. 02/09) Summons in a Civil Action (Page 2)

Civil Action No. 01cv00072-BB

**PROOF OF SERVICE**

*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(l))*

This summons for *(name of individual and title, if any)* Deborah Faulkner  
was received by me on *(date)* \_\_\_\_\_ .

I personally served the summons on the individual at *(place)* \_\_\_\_\_  
on *(date)* \_\_\_\_\_ ; or

I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
\_\_\_\_\_, a person of suitable age and discretion who resides there,  
on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

I served the summons on *(name of individual)* \_\_\_\_\_, who is  
designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
on *(date)* \_\_\_\_\_ ; or

I returned the summons unexecuted because \_\_\_\_\_ ; or

Other *(specify)*: I served Deborah Faulkner via certified mail, Restricted delivery

My fees are \$ 0 for travel and \$ 10.48 for services, for a total of \$ 10.48 .

I declare under penalty of perjury that this information is true.

Date: 3/30/11

  
\_\_\_\_\_  
*Server's signature*

Khateelah E Jones, Honor Paralegal  
\_\_\_\_\_  
*Printed name and title*  
999 18<sup>th</sup> St Ste 370 South Terrace  
denver CO 80202

\_\_\_\_\_  
*Server's address*

Additional information regarding attempted service, etc:

AO 440 (Rev. 02/09) Summons in a Civil Action (Page 2)

Civil Action No. 01cv00072-BB

**PROOF OF SERVICE**

*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(l))*

This summons for *(name of individual and title, if any)* Dolores Kates  
was received by me on *(date)* \_\_\_\_\_.

I personally served the summons on the individual at *(place)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_ ; or

I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
\_\_\_\_\_, a person of suitable age and discretion who resides there,  
on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

I served the summons on *(name of individual)* \_\_\_\_\_, who is  
designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_ ; or

I returned the summons unexecuted because \_\_\_\_\_ ; or

Other *(specify)*: I served Dolores Kates via certified Mail, Restricted delivery.

My fees are \$ 0 for travel and \$ 10.48 for services, for a total of \$ 10.48.

I declare under penalty of perjury that this information is true.

Date: 3/30/11



*Server's signature*

Khalilah E. Jones, Honor Paralegal

*Printed name and title*

999 18th St Ste 370 South Terrace  
Denver CO 80202

*Server's address*

Additional information regarding attempted service, etc:

AO 440 (Rev. 02/09) Summons in a Civil Action (Page 2)

Civil Action No. 01cv00072-BB

**PROOF OF SERVICE**

*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(l))*

This summons for *(name of individual and title, if any)* Linda Murphy  
was received by me on *(date)* \_\_\_\_\_

I personally served the summons on the individual at *(place)* \_\_\_\_\_  
on *(date)* \_\_\_\_\_ ; or

I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
\_\_\_\_\_, a person of suitable age and discretion who resides there,  
on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

I served the summons on *(name of individual)* \_\_\_\_\_, who is  
designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
on *(date)* \_\_\_\_\_ ; or

I returned the summons unexecuted because \_\_\_\_\_ ; or

Other *(specify)*: I served Linda Murphy via Certified Mail, Restricted delivery.

My fees are \$ 0 for travel and \$ 10.48 for services, for a total of \$ 10.48

I declare under penalty of perjury that this information is true.

Date: 3/30/11

*Server's signature*

Khaleelah E Jones, Honor Paralegal  
*Printed name and title*

999 18th St Suite 370 South Terrace  
Denver CO 80202

*Server's address*

Additional information regarding attempted service, etc:

Summon

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- 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.

A. Signature  
 X *Dolores T. Kates*  Agent  Addressee

B. Received by (Printed Name) *Dolores T. Kates* C. Date of Delivery *2-25-11*

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

1. Article Addressed to:

Dolores Kates  
 1316 Coronado Street  
 Las Cruces NM 88005

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Transfer from service label) 7008 1830 0001 5247 7652

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- 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.

A. Signature  
 X *Dolores T. Kates*  Agent  Addressee

B. Received by (Printed Name) *Dolores T. Kates* C. Date of Delivery *2-25-11*

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

1. Article Addressed to:

Deborah Faulkner  
 1316 Coronado Street  
 Las Cruces, NM 88005

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Transfer from service label) 7008 1830 0001 5247 7645

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- 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.

A. Signature  
 X *A. Standifer*  Agent  Addressee

B. Received by (Printed Name) *A. Standifer* C. Date of Delivery *2-25-11*

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

1. Article Addressed to:

Linda Murphy  
 808 Boardman Ave  
 Gallup NM 87301

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Transfer from service label) 7008 1830 0001 5247 7614

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

