

STATE OF NEW MEXICO
COUNTY OF HIDALGO
SIXTH JUDICIAL DISTRICT

STATE OF NEW MEXICO <i>ex rel.</i>)	No. D-623-CV 2005-00054
NEW MEXICO STATE ENGINEER,)	Honorable Jarod K. Hofacket
)	
Plaintiff,)	ANIMAS UNDERGROUND WATER
vs.)	BASIN ADJUDICATION
)	
ROSETTE, INC., <i>et al.</i> ,)	Subfile No. AUB-039-1007
)	
Respondents.)	
_____)	

RETURN OF SERVICE

The State of New Mexico, *ex rel.* Office of the State Engineer, files proof of return of service of process for the following entity. A copy of the return receipt is attached for the following entity, which was served by certified mail, return receipt requested:

<u>Claimant</u>	<u>Service Date</u>
Dunagan Ranch, LLC c/o Dusti R. Conover 107 Needmore Ranch Rd. Animas, NM 88020-9362	September 28, 2023

Respectfully submitted,

UTTON & KERY, P. A.
Attorney for Plaintiff State of New Mexico ex rel.
New Mexico State Engineer
500 Tijeras Ave. NW
Albuquerque, NM 87102
(505) 379-4203

Electronically Filed
By: /s/Susan C. Kery
SUSAN C. KERY
susan@uttonkery.com

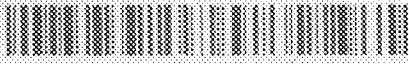
CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing was mailed to the following claimant and served to the parties of record via the Court's Odyssey File & Serve System this 4th day of October, 2023.

Dunagan Ranch, LLC
c/o Dusti R. Conover
107 Needmore Ranch Rd.
Animas, NM 88020-9362

/s/Susan C. Kery

SUSAN C. KERY

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ 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 <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Dunagan Ranch, LLC c/o Dusti R. Conover 107 Needmore Ranch Rd. Animas, NM 88020-9362  9590 9402 5635 9308 7827 89	B. Received by (Printed Name) Dusti Conover	C. Date of Delivery 9-23-23
2. Article Number (transfer from service label) 7021 0950 0001 1428 7708	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No 3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Restricted Delivery <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
PS Form 3811, July 2016 PSN 7530-02-000-9053 <i>57-100761008</i> Domestic Return Receipt		