

**STATE OF NEW MEXICO  
COUNTY OF HIDALGO  
SIXTH JUDICIAL DISTRICT COURT**

<b>STATE OF NEW MEXICO <i>ex rel.</i></b>	)	<b>No. D-623-CV-2005-00054</b>
<b>NEW MEXICO STATE ENGINEER,</b>	)	<b>Honorable Jarod K. Hofacket</b>
	)	
<b>Plaintiff,</b>	)	<b>ANIMAS UNDERGROUND WATER</b>
<b>vs.</b>	)	<b>BASIN ADJUDICATION</b>
	)	
<b>ROSETTE, INC., <i>et al.</i>,</b>	)	<b>Subfile No. AUB-021-1003</b>
	)	
<b>Respondents.</b>	)	
_____	)	

**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 persons. A copy of the return receipt is attached for the following persons, who were served by certified mail, return receipt requested:

Claimants

Service Date

Jay Marcus Mitchell  
Lenna Kaye Mitchell  
P.O. Box 14  
Animas, NM 88020-0014

August 16, 2025

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](mailto:susan@uttonkery.com)

**CERTIFICATE OF SERVICE**

I HEREBY CERTIFY that a true and correct copy of the foregoing was mailed to the following claimants and served to the parties of record via the Court's Odyssey File & Serve System this 25th day of August, 2025.

Jay Marcus Mitchell  
Lenna Kaye Mitchell  
P.O. Box 14  
Animas, NM 88020-0014

/s/Susan C. Kery

SUSAN C. KERY

**SENDER: COMPLETE THIS SECTION**

- 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.

1. Article Addressed to:

Jay and Lenna Mitchell  
P.O. Box 14  
Animas, NM 88020-0014



9590 9402 5635 9308 7827 72

2. Article Number (Transfer from service label)

7021 0950 0001 1428 8583

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Jay Marcus Mitchell*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Jay Marcus Mitchell

C. Date of Delivery

8/16/2025

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

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

21-1003 + 21-1004

Domestic Return Receipt