

OK

ORIGINAL

FILED

04 JUN 30 PM 3:10

LANCE S. WILSON  
CLERK  
BY OK  
DEPUTY

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF NEVADA

UNITED STATES OF AMERICA, )  
)  
Plaintiff, )

WALKER RIVER PAIUTE TRIBE, )  
)  
Plaintiff-Intervenor, )

v. )

WALKER RIVER IRRIGATION DISTRICT,) )  
a corporation, et al., )  
Defendants. )

IN EQUITY NO. C-125-ECR  
SUBFILE NO. C-125-B

NOTICE OF APPEARANCE AND INTENT TO PARTICIPATE

- 1. I hereby enter my appearance in this sub-proceeding in this case.
- 2. I am filing this document with the District Court at the following address:

Chief Deputy Clerk  
United States District Court for the District of Nevada  
400 South Virginia Street, Suite 401  
Reno, Nevada 89501

- 3. In the envelope provided for return of my Waiver of Service of Notice in Lieu of Summons, I am mailing a copy of this document to:

Susan L. Schneider  
Attorney for the United States of America  
United States Department of Justice  
Environment & Natural Resources Division  
P.O. Box 756  
Littleton, Colorado 80160

- 4. I (or the entity on whose behalf I am acting) will retain all defenses or objections to the lawsuit or to the jurisdiction or venue of the court except for objections based on a defect in the Notice in Lieu of Summons or in the service of the Notice in Lieu of Summons.

- 5. If I (or the entity on whose behalf I am acting) have retained an attorney to represent me in these proceedings, I identify that attorney below, along with his or her mailing address, telephone number and facsimile number.

317.

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

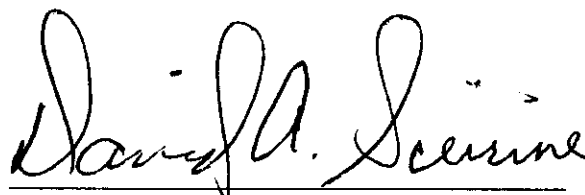
Attorney: Gordon H. DePaoli, Dale E. Ferguson

Address: Woodburn and Wedge  
P.O. Box 2311  
Reno, NV 89505

Phone Number: 775/688-3000

Fax Number: 775/688-3088

Dated this 19 day of June, 2004.

  
\_\_\_\_\_  
(Signature)

David A. Sceirine  
\_\_\_\_\_  
(Printed or typed name)

\_\_\_\_\_  
(Entity, if any, on whose behalf you are appearing)

P.O. Box 1013  
\_\_\_\_\_

Yerington, NV 89447  
\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Telephone number)