

# **Northern Star Resources**

## **KCGM Operations**

### **International Cyanide Management Code**

#### **Mining Operations Recertification Audit**

#### **Corrective Action Plan**

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Submitted to:

**The International Cyanide Management Institute**

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## 1. INTRODUCTION

As part of the certification process under the International Cyanide Management Code (Cyanide Code), any mining, production, or transportation operation identified as either in substantial compliance or non-compliance during audit proceedings must establish and enact a Corrective Action Plan (CAP). For operations assessed as being in substantial compliance but requiring conditional certification, the CAP must be fully executed and formally communicated to the Institute within one year of the associated Summary Audit Report being published on the Cyanide Code website. In contrast, no fixed timeline applies to CAPs addressing full non-compliance findings.

In May 2025, Northern Star Resources – Kalgoorlie Consolidated Gold Mines (KCGM) Operations underwent an International Cyanide Management Institute (ICMI) Cyanide Code Recertification Audit for Mining Operations at their Fimiston and Gidji Plants. The audit confirmed that all Code Principles and Standards of Practice (SoP) were fully compliant, except for Stand of Practice 4.1, 4.7 and 6.2 that were found to be in substantial compliance.

To address the identified deficiencies, a CAP has been developed. The table below outlines the CAP, agreed upon by KCGM and the Lead Auditor, necessary to bring the operation into full compliance, as detailed in the Detailed Audit Report and the Summary Audit Report.

## 2. VERIFICATION

Once all corrective measures have been concluded, the Lead Auditor will compile a CAP Completion Report. This document, due within 30 days of final implementation, will be signed by the Lead Auditor and will outline the supporting evidence that substantiates full compliance for every identified deficiency.

### 3. CORRECTIVE ACTION PLAN

Deficiency	Corrective Action	Evidence	Completion
<b>Standard of Practice 4.1: Implement management and operating systems designed to protect human health and the environment including contingency planning as and inspection and preventive maintenance procedures.</b>			
<p>Documented general area inspections at the Fimiston Plant, which were intended to assess pumps and valves, were found to be incomplete during certain periods of the recertification cycle.</p> <p>Although inspections were confirmed to have taken place, proper documentation had not been consistently maintained.</p> <p>During the site visit, precipitated cyanide salt deposits and encrustation were noted on several cyanide solution pumps and valves.</p> <p>The lack of inspections during the recertificate period has led to a conclusion of substantial compliance with the applicable Standard of Practice.</p>	<p>Inspections involving pumps and valves must be reinforced and conducted at scheduled intervals in accordance with site-specific operational requirements.</p> <p>All inspection tasks are to be assigned to competent personnel, with findings documented and corrective actions implemented accordingly.</p> <p>Cyanide solution pumps and valves with visible cyanide salt encrustation must be identified and cleaned appropriately.</p>	<p>To close out the corrective actions at the Fimiston Plant, the following evidence should be compiled and verified.</p> <p>Inspection records covering a minimum six-month period, specifically addressing secondary containment pumps and valves.</p> <p>Evidence of cyanide pump and valve cleaning, such as cleaning reports or work orders outlining the methods and personnel involved, must be provided.</p>	15 May 2026
<b>Standard of Practice 4.7: Provide spill prevention or containment measures for process tanks and pipelines.</b>			
<p>Secondary and tertiary containment structures at the Fimiston Plant were observed to hold excessive volumes of process water and sediment.</p> <p>This condition may undermine effective containment in the event of a significant spill and has contributed to a finding of substantial compliance with this Standard of Practice.</p>	<p>To address the findings at the Fimiston Plant, accumulated process water and sediment must be removed from secondary and tertiary containment areas.</p> <p>A root cause analysis must be undertaken to determine the source of spills and leaks, with appropriate corrective and preventive actions implemented to mitigate recurrence.</p>	<p>To close out the corrective actions at the Fimiston Plant, the following evidence should be compiled and verified.</p> <p>Photographic documentation showing the removal of excess water and sediment from secondary and tertiary containment areas, along with dated logs confirming the completion of these cleaning activities.</p> <p>Evidence is to be provided demonstrating that the root causes of all spills and leaks have been</p>	15 May 2026

Deficiency	Corrective Action	Evidence	Completion
		identified, corrective actions implemented, and preventive measures established to reduce the likelihood of recurrence.	
<b>Standard of Practice 6.2: Operate and monitor cyanide facilities to protect worker health and safety and periodically evaluate the effectiveness of health and safety measures.</b>			
At the Fimiston Plant, tailings delivery and return pipelines were not labelled to alert workers to the presence of cyanide, including the direction of flow.	To address the finding at the Fimiston Plant, tailings delivery and return pipelines must be labelled to alert workers to the presence of cyanide, including the direction of flow.	To close out the corrective action at the Fimiston Plant, evidence should be compiled and verified, including photographs showing labels on tailings delivery and return pipelines that alert workers to the presence of cyanide and indicate the direction of flow.	15 May 2026

## 4. LIMITATIONS

This Corrective Action Plan has been prepared based on the findings of the audit assessment conducted in accordance with the Cyanide Code. The report evaluates compliance with Cyanide Code requirements as observed during the audit.

The audit scope is limited to the areas, processes, and practices reviewed at the time of assessment. Findings are based on information provided by the audited operation, including documents, records, and site inspections viewed on a sample basis. This report does not constitute a guarantee of ongoing compliance, as conditions may change following the audit. This report is provided specifically for the purpose of Cyanide Code compliance verification and must not be used for any other purpose without prior authorization. No responsibility is accepted for its use, in whole or in part, outside of this permitted scope.

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