

**International Cyanide Management Code  
Mining Operations Recertification Audit  
Evolution Mining (Cowal) Pty Ltd  
Cowal Gold Mine**

**Corrective Action Plan**

**30 June 2025**



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## 1. Audit Details

Name of Mine: Cowal Gold Mine (CGM)  
Name of Mine Owner: Evolution Mining (Cowal) Pty Ltd  
Name of Mine Operator: Evolution Mining (Cowal) Pty Ltd  
Name of Responsible Manager: Joe Mammen, General Manager  
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Audit Company: Veritas Metallica Pty Ltd  
Audit Team Leader: Tom Gibbons  
Email: Tom\_G@westnet.com.au  
Date(s) of Audit: 11 – 15 November 2024 Inclusive  
Names and Signatures of Other Auditors:

Celeste Ellice 30 June 2025

Cowal Gold Mine

Name of Mine

Signature of Lead Auditor

30 June 2025

Date



## 2. Introduction

The development and implementation of a Corrective Action Plan is required as an integral part of any audit for Cyanide Code certification of a mining operation, where the auditor, based on the audit findings, determines that the operation is in substantial compliance and is certified conditionally, or is in non-compliance and cannot be certified.

The full implementation of the Corrective Action Plan and adequate notification to the International Cyanide Management Institute (ICMI) must be completed within one year of the posting on the Cyanide Code website of the Summary Audit Report of an operation found in Substantial Compliance.

In November 2024, CGM underwent its seventh re-certification audit and was found to be in Substantial Compliance for nine standards of practice (3.2, 4.1, 4.3, 4.5, 4.7, 7.1, 7.4, 7.6, and 9.2) following finalization of the assessment of all relevant data and inspections on 04 March 2025.

The deficiencies, corrective actions, proposed completion date, and evidence required to attain Full Compliance are provided in the table below.



### 3. Corrective Action Plan Details

**Standard of Practice 3.2: Operate unloading, storage and mixing facilities using inspections, preventive maintenance and contingency plans to prevent or contain releases and control and respond to worker exposures.**

3.2.3: Has the operation developed and implemented plans or procedures to prevent exposures and releases during cyanide unloading and mixing activities such as:

a: Operation and maintenance of all hoses, valves and couplings for unloading liquid cyanide and mixing solid or liquid cyanide?

e: Providing for safe unloading of liquid cyanide and manual mixing of solid cyanide by requiring appropriate personal protective equipment and having a second individual observe from a safe area, or remote observation by video?

Deficiency	Corrective Actions	Evidence Required	Completion Date
During a field inspection, the Auditor observed deviations from the Cyanide Unloading, Mixing and Storage Procedure, related to correct use of personnel protective equipment, operation of drain valves, location of emergency cut-off valves, communication during cyanide spills, and Spotter duties.	<ul style="list-style-type: none"> <li>Implement recommended corrective actions from corresponding Incident Report.</li> <li>Provide training records for Cyanide Delivery Drivers confirming that they are adequately trained and competent on use of personnel protective equipment and operation of drain valves during cyanide unloading and mixing.</li> <li>Ensure Control Room Process Technicians are aware of requirement to respond to fixed hydrogen cyanide monitor alarms during cyanide unloading.</li> <li>Provide six months of cyanide unloading records confirming that procedures are being correctly followed and further spills avoided.</li> </ul>	<ul style="list-style-type: none"> <li>Close-out Report from Incident No 846644 confirming all corrective actions have been implemented.</li> <li>Summary report demonstrating that Cyanide Delivery Drivers confirming are adequately trained and competent on use of personnel protective equipment and operation of drain valves during cyanide unloading and mixing.</li> <li>Minutes of Safety Meeting or Pre-Start Meetings demonstrating that Process Technician monitoring within the Control Room are aware of requirement to respond to fixed hydrogen cyanide monitor alarms during cyanide unloading.</li> </ul>	04 September 2025



		<ul style="list-style-type: none"> <li>• Cyanide unloading records demonstrating that cyanide unloading procedures are being correctly followed and further spills avoided.</li> </ul>	
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**Standard of Practice 4.1: Implement management and operating systems designed to protect human health and the environment including contingency planning and inspection and preventive maintenance procedures.**

4.1.4: Does the operation have a procedure to identify when changes in a site's processes or operating practices may increase the potential for the release of cyanide and to incorporate the necessary release prevention measures?

Deficiency	Corrective Actions	Evidence Required	Completion Date
No Management of Change Workflow, as it relates to cyanide and the Cyanide Code, was available for the Paste Plant Project.	<ul style="list-style-type: none"> <li>• Evaluate existing Paste Plant Design and Operation against the Standards of Practice of the Mining Operations Verification Protocol.</li> <li>• Develop Action List from Paste Plant Evaluation.</li> <li>• Implement Paste Plant Evaluation Action List.</li> </ul>	<ul style="list-style-type: none"> <li>• Gap Analysis Report assessing the Paste Plant against the Standards of Practice of the Mining Operations Verification Protocol.</li> <li>• Completion Report demonstrating implementation of all action items arising from the Paste Plant Gap Analysis.</li> </ul>	04 December 2025

**Standard of Practice 4.3: Implement a comprehensive water management program to protect against unintentional releases.**

4.3.1: Has the operation developed a comprehensive, probabilistic water balance?

Deficiency	Corrective Actions	Evidence Required	Completion Date
Records for the Probabilistic Water Balance Model Run and Reports are incomplete.	<ul style="list-style-type: none"> <li>• Revise Procedures and Systems to ensure that periodic model run requirement is flagged.</li> <li>• Provide three consequent quarterly model runs commencing Q1 2025.</li> </ul>	<ul style="list-style-type: none"> <li>• Revised procedures and system information demonstrating that a mechanism is in place to trigger the requirement to complete a Probabilistic Water Balance Run and corresponding summary report on a quarterly basis.</li> <li>• Probabilistic Water Balance Quarterly Summary reports for Q1, Q2, Q3 2025.</li> </ul>	30 September 2025



**Standard of Practice 4.5: Implement measures to protect fish and wildlife from direct and indirect discharges of cyanide process solutions to surface water.**

4.5.2: Does the operation monitor for cyanide in surface water downgradient of the site and can the operation demonstrate that direct discharges to surface water do not cause the concentration of free cyanide in the receiving water to exceed 0.022 mg/l downstream of any established mixing zone?

Deficiency	Corrective Actions	Evidence Required	Completion Date
CGM has not consistently assayed for cyanide in surface water (Lake Cowal) downgradient of the Operation during the audit period.	<ul style="list-style-type: none"> <li>Revise the Monitoring Procedures to include quarterly weak-acid dissociable (WAD) cyanide monitoring at the following monitoring locations: <ul style="list-style-type: none"> <li>➤ 14 (P1)</li> <li>➤ 15 (P2)</li> <li>➤ 16 (P3)</li> <li>➤ 17 (B1)</li> <li>➤ 18 (B6)</li> </ul> </li> <li>Provide monitoring results demonstrating that cyanide monitoring in Lake Cowal is occurring.</li> </ul>	<ul style="list-style-type: none"> <li>Revised Monitoring Procedures demonstrating requirement of WAD cyanide monitoring at nominated monitoring locations.</li> <li>Published Environmental Monitoring Reports for Q1, Q2, Q3 2025 demonstrating WAD cyanide monitoring at nominated locations.</li> </ul>	30 September 2025

**Standard of Practice 4.7: Provide spill prevention or containment measures for process tanks and pipelines.**

4.7.1: Are spill prevention or containment measures provided for all cyanide unloading, storage, mixing and process solution tanks?

Deficiency	Corrective Actions	Evidence Required	Completion Date
During a field inspection of the Flotation Tailings Leach (FTL) circuit on 12 November 2024, a significant number of leak detection ports, also known as tell tales, were found to be blocked.	<ul style="list-style-type: none"> <li>Following cleaning, valves, caps or similar to be fitted on ports to avoid blockage reoccurrence and allow periodic inspection.</li> </ul>	<ul style="list-style-type: none"> <li>Photographic evidence demonstrating leak detection ports have been fitted with valves.</li> </ul>	30 July 2025



Monthly inspection sheets for the FTL circuit did not identify that the ports were blocked.	<ul style="list-style-type: none"> <li>• Communicate importance of leak detection inspections to Process Technicians.</li> <li>• Provide Leak Detection Inspection records showing appropriate assessment of leak detection reports.</li> </ul>	<ul style="list-style-type: none"> <li>• Minutes of Safety Meeting or Pre-Start Meetings demonstrating that Process Technicians are aware of requirement to check leak detection ports during inspections, and note if the port appears blocked or damaged.</li> <li>• Provide records for 6 consecutive monthly area inspections since ports unblocked demonstrating appropriate completion of leak detection inspections form.</li> </ul>	30 August 2025
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**Standard of Practice 7.1: Has the operation developed an Emergency Response Plan to address potential accidental releases of cyanide and cyanide exposure incidents?**

7.1.1: Does the Plan consider the potential cyanide failure scenarios appropriate for its site-specific environmental and operating circumstances, including the following, as applicable?

b: Transportation accidents occurring on site or in close proximity to the operation?

Deficiency	Corrective Actions	Evidence Required	Completion Date
CGM's Emergency Response Plan does not adequately address Transportation accidents occurring on site or in close proximity to the operation.	<ul style="list-style-type: none"> <li>• Revise Emergency Response Plan to include scenarios of a transportation accident both on, and in close proximity to the operation.</li> </ul>	<ul style="list-style-type: none"> <li>• Revised Emergency Response Plan to include a Pre-Incident Plan (PIP) or equivalent, detailing specific response steps for the scenarios of a transportation accident on site, and separately for a transportation accident occurring in close proximity to the operation. The PIP shall include specific details on communication and liaison with local emergency services, the cyanide transporter, the cyanide producer, and other relevant stakeholders. If it is the intention of CGM not</li> </ul>	30 June 2025





		to directly response to a transportation accident in close proximity to the operation, this shall clearly be defined within the PIP, along with other requirements above.	
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**Standard of Practice 7.4: Develop procedures for internal and external emergency notification and reporting.**

7.4.3: Does the operation have a procedure for notifying ICMI of any significant cyanide incidents, as defined in ICMI's Definitions and Acronyms document? Have all such significant cyanide incidents that have occurred been reported to ICMI?

Deficiency	Corrective Actions	Evidence Required	Completion Date
A procedure for notifying ICMI of any significant cyanide incidents was in place for only a portion of the audit period, resulting in a potential cyanide exposure incident not be evaluated for the need to report to ICMI. Contributing to this deficiency is inadequate understanding of reporting requirements by CGM Supervisors and Management. (CGM have subsequently reported the incident to ICMI, and it has been clarified as a near-miss incident.)	<ul style="list-style-type: none"> <li>Communicate ICMI reporting requirements to the Cyanide Code Champion, Processing Manager, Sustainability Manager, and CGM Senior Leadership Team and Senior Site Executives.</li> <li>Revise procedures and systems to ensure appropriate evaluation and timely future reporting of significant cyanide incidents to ICMI.</li> </ul>	<ul style="list-style-type: none"> <li>Training or Briefing Records confirming attendance and comprehension of ICMI reporting requirements.</li> <li>Revised procedures and system information demonstrating that a mechanism is in place to trigger timely evaluation of any cyanide-related incident, such that if it meets the nominated criteria, it is reported to ICMI within 24 hours of occurrence.</li> </ul>	30 July 2025

**Standard of Practice 7.6: Periodically evaluate response procedures and capabilities and revise them as needed.**

7.6.2: Are mock cyanide emergency drills conducted periodically?

Deficiency	Corrective Actions	Evidence Required	Completion Date
A mock cyanide emergency drill was not conducted in 2023.	<ul style="list-style-type: none"> <li>Revise procedures and systems to trigger requirement for annual mock cyanide emergency drills.</li> </ul>	<ul style="list-style-type: none"> <li>Revised procedures and system information demonstrating that a mechanism is in place to</li> </ul>	31 August 2025



	<ul style="list-style-type: none"> <li>Conduct mock cyanide emergency drill no later than 30 July 2025.</li> </ul>	<p>trigger the requirement for a mock cyanide emergency drill on an annual basis.</p> <ul style="list-style-type: none"> <li>Emergency Response Drill Schedule for 2025, 2026, and 2027, demonstrating that at least one mock cyanide emergency drill is scheduled each year.</li> <li>Mock Cyanide Emergency Drill Debrief Report, confirming outcomes of drill have been used to evaluate potential requirement to revise emergency response plans, procedures, equipment, and training.</li> </ul>	
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**Standard of Practice 9.2: Make appropriate operational and environmental information regarding cyanide available to stakeholders.**

9.2.3: Does the operation make information publicly available on the following confirmed cyanide release or exposure incidents?

a: Cyanide exposure resulting in hospitalization or fatality?

Deficiency	Corrective Actions	Evidence Required	Completion Date
<p>There is no clearly defined method established to make cyanide exposure incidents publicly available, resulting in inadequate evaluation of a potential cyanide exposure for the need for public disclosure. Contributing to the deficiency to adequately evaluate the incident for disclosure was inadequate understanding of Code disclosure requirements by CGM Supervisors and Management, as assessed in interviews and discussions during the field audit.</p>	<ul style="list-style-type: none"> <li>Revise procedures and systems to ensure public reporting of confirmed cyanide release or exposure incidents.</li> <li>Communicate Cyanide Code public reporting requirements to the Cyanide Code Champion, Processing Manager, and Sustainability Manager.</li> </ul>	<ul style="list-style-type: none"> <li>Revised procedures and system information demonstrating that a mechanism is in place to trigger evaluation of any cyanide-related release or exposure incident, to assess potential requirement for public reporting.</li> <li>Training or Briefing Records confirming attendance and comprehension of Cyanide Code public reporting requirements.</li> </ul>	30 July 2025

