St Ives Gold Mining

International Cyanide Management Code (ICMC)

Corrective Action Plan Completion Report

GBS Consulting

2 June 2025

Audit Details

Operation: St Ives Gold Mine (SIGM)

Name of Mine Owner: Goldfields Australia Limited

Company: St Ives Gold Mining Company (Pty)

Responsible Person: Paul Miskell, Processing Manager

Contact Telephone: +61 8 9088 1791

Audit Site Visit Dates: 26 - 30 August 2024

Auditor Information

Audit Company: GBS Consulting Pty Ltd

Lead Auditor and Primary contact: Greg Smith

Email: <u>gregorsmith@internode.on.net</u>

Telephone: +61 418 971 967

2 June 25

Signature of Lead Auditor

Date

St Ives Gold Mine

Name of Mine

In Dan.

Signature of Lead Auditor

2 June 2025

Date

1. Introduction

In August 2024, St Ives Gold Mine (SIGM) underwent its fourth re-certification audit. Following finalization of the assessment of all relevant data and inspections on 28 November 2024, SIGM was found to be in Substantial Compliance with Standards of Practice 4.4 and 7.3. A Corrective Action Plan was subsequently developed with a requirement for six months of compliant documentation with a proposed completion date of 28 May 2025.

2. Verification of Corrective Action Plan Implementation

SIGM provided documentation to GBS Consulting on 30 May 2025 to address deficiencies identified in the CAP and verify full compliance with standards of practice (4.4 and 7.3). A review of the documentation provided was undertaken by GBS Consulting in June 2025 and the results of this review are provided in Table 1.

This review found that SIGM has fully implemented the required actions contained within the CAP and is now assessed to be fully compliant with the International Cyanide Management Code (ICMC)

St Ives Gold Mine	Ly Diff.	2 June 2025	
Name of Mine	Signature of Lead Auditor	Date	

Deficiency				Corrective Actions	Evidence Observed	Compliance Status
Standard of Pra- solutions.	ctice: 4.4 lm	nplement mea	asures to prote	ect birds, other wildlife and li	vestock from adverse effects of cya	nide process
			•	oncentration in open water i able (WAD) cyanide?	n Tailings Storage Facilities (TSF), le	each facilities
4.4.3 Is maintain mortality?	ing a WAD o	cyanide conce	entration of 50	mg/l or less in open water e	ffective in preventing significant wi	ldlife
SIGM operates we for Standard of Poroviding a protesty anosis within the Process Water Poperameters for Signature of Parameter	ractice 4.4 w ective mecha ne Tailings S ond. Site spe	vith hypersaling anism against torage Facilit acific operatin	nity wildlife ies (TSF) and ig	Maintain cyanide and salinity operating parameters at the TSF and Process Water Pond for a period of six months from 28 November 2024.	A spreadsheet containing Weak Acid Dissociable (WAD) cyanide and salinity data that demonstrates compliance with operating parameters at the TSF and Process Water Pond on a daily basis was provided for six months from 28 November 2024 to 28 May 2025. The highest WAD cyanide value	Full Compliance
Spigot	132	112	50,000		at the TSF spigot was 109.5 mg/L.	
Supernatant	65	N/A	50,000		The highest WAD cyanide value	
Process Water Pond	65	N/A	50,000		within the TSF Supernatant (Decant) was 59.5 mg/L.	
On eight days th	-				The highest WAD cyanide value within the Process Water Pond was 59.2 mg/L.	

exceedances are considered to be a systematic deficiency despite the small number of incidents (eight) as they resulted from a control logic programmed into the Supervisory Control and Data Acquisition (SCADA) system, were not identified at the time and effective remedial actions were not carried out in a suitable time frame		All samples which had a WAD cyanide of greater than 50 mg/L had a salinity reading of greater than 50 000 mg/L Total Dissolved Solids (TDS). Only three samples from the Process Water Pond had salinities of below 50 000 mg/L TDS and these all had WAD cyanide readings of below 10 mg/L WAD cyanide. Samples were not taken on six days at the spigot during the six-month CAP period due to the mill being shutdown and no tailings being discharged. Samples were taken on all days at the TSAF supernatant and Process water Pond during the CAP period.	
Wildlife Monitoring was not conducted at the Process Water Pond (PWP) between 28 September 2023 and 8 March 2024 (150 days) which is a deficiency. This was mostly concurrent with the period that cyanide monitoring was not conducted at the PWP. Wildlife monitoring has been conducted daily since it was recommenced on 9 March 2024 which is a period of approximately 5.5 months to 15 August 2024 (the last date data was provided). The Wildlife Monitoring Spreadsheet does not provide clear details of how	Maintain Wildlife Observations at the TSF and Process Water Pond for a period of six months from 28 November 2024 and clearly provide monitoring information for the PWP in the Wildlife Monitoring Spreadsheet.	A spreadsheet containing wildlife monitoring data has been provided and demonstrates wildlife monitoring has been conducted at the TSF and Process Water Pond on a daily basis for six months from 28 November 2024. Review the Wildlife Monitoring data	Full Compliance

long the Process Water Pond was monitored for or if wildlife was observed there.		includes separate lines on each day for the TSF and PWP to clarify that the Process Water Pond has been monitored and to record any wildlife observed. Wildlife monitoring was conducted on all days during the 6-month CAP period.	
Standard of Practice: 7.3 Designate appropriate person response	nnel and commit necessary e	equipment and resources for emer	gency
7.3.1: Do the cyanide-related elements of the Emergence equipment to ensure its availability?	cy Response Plan : g) Include	procedures to inspect emergency	response
It was identified during a Gap Audit in December 2022 that the ERT inspection records for 2022 were incomplete and that this was as a deficiency. Many hardcopies of equipment inspection records had either been lost or not scanned into the electronic storage system. Gaps within the documented records for Emergency Response Team (ERT) inspections were still evident during 2024.	Conduct all scheduled ERT inspections and retain all documentation for a period of six months from 28 November 2024.	Completed ERT inspections for the CAP period were provided along with an inspection compliance tracking sheet. Documentation was verified and demonstrated that inspections are occurring at the required frequency, are documented and that records are retained.	Full Compliance