

Please note as per Section 15.02.4 of the **Mine Health and Safety Regulations**: No work shall commence until the safety program is accepted by the Chief Inspector.

Submission Date: \_\_\_\_\_

| Section #   | In Compliance with <i>Mine Health and Safety Regulations</i>                                                                       | Details |
|-------------|------------------------------------------------------------------------------------------------------------------------------------|---------|
| 15.02.1 (a) | <b>Before any exploration activity is commenced, the owner shall submit to the Chief Inspector an operational plan containing:</b> |         |
|             | The owner's name (the principal exploration company)                                                                               |         |
|             | The owner's address                                                                                                                |         |
|             | The owner's WSCC employer number                                                                                                   |         |
|             | The owner's contact person                                                                                                         |         |
|             | The contact person's phone number                                                                                                  |         |
|             | Joint venture partners (if more than 4 J.V. partners, list on last page)<br>Exploration company #2's name                          |         |
|             | Exploration company #3's name                                                                                                      |         |
|             | Exploration company #4's name                                                                                                      |         |
|             | Exploration company #5's name                                                                                                      |         |
|             | Exploration project's official title                                                                                               |         |
|             | Year of exploration program                                                                                                        |         |
|             | Region of exploration program                                                                                                      |         |

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# Exploration Safety Plan Form

| Section #                           | In Compliance with <i>Mine Health and Safety Regulations</i>                                                                             | Details |
|-------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|---------|
| 15.02.1<br>(a)<br>continued         | To permit number                                                                                                                         |         |
|                                     | Native owned land                                                                                                                        |         |
|                                     | From permit number                                                                                                                       |         |
|                                     | To permit number                                                                                                                         |         |
|                                     | <b>Details of the proposed method of exploration:</b>                                                                                    |         |
|                                     | Exploring for (base metals/diamonds/gold/silver/uranium/other)?                                                                          |         |
|                                     | 1.) Is the work likely to encounter gas pocket(s)?                                                                                       |         |
|                                     | 2.) Is the work likely to encounter ionizing radiation?                                                                                  |         |
|                                     | 3.) Will the work involve drilling from lake or river ice?                                                                               |         |
|                                     | <b>If the answer to one of the above 3 questions is yes - also submit the proposed hazard control program which will be implemented:</b> |         |
|                                     | Drilling program - number of holes and/or 'X' feet/meters of drilling                                                                    |         |
|                                     | Other mechanical disturbance                                                                                                             |         |
|                                     | Other exploration work                                                                                                                   |         |
|                                     | Exploration program operator's company name (if different from owner)                                                                    |         |
| Name of person in charge of program |                                                                                                                                          |         |
| Person in charge's phone number     |                                                                                                                                          |         |

# Exploration Safety Plan Form

| Section #                   | In Compliance with <i>Mine Health and Safety Regulations</i> | Details |
|-----------------------------|--------------------------------------------------------------|---------|
| 15.02.1<br>(a)<br>continued | Person in charge's fax number                                |         |
|                             | Name of field person in charge of program                    |         |
|                             | Supervisor level of field person in charge                   |         |
|                             | Certificate number                                           |         |
|                             | Certificate expiry                                           |         |
|                             | Drilling company's name                                      |         |
|                             | Office location                                              |         |
|                             | Contact's name                                               |         |
|                             | Contact's phone number                                       |         |
|                             | Name of field person in charge of drillers                   |         |
|                             | Supervisor level of field person in charge of drillers       |         |
|                             | Certificate number                                           |         |
|                             | Certificate expiry                                           |         |
|                             | Catering company's name                                      |         |
|                             | Office location                                              |         |
|                             | Contact's name                                               |         |
|                             | Contact's phone number                                       |         |
|                             | Expediting company's name                                    |         |
|                             | Office location                                              |         |

# Exploration Safety Plan Form

| Section #                   | In Compliance with <i>Mine Health and Safety Regulations</i>  | Details |
|-----------------------------|---------------------------------------------------------------|---------|
| 15.02.1<br>(a)<br>continued | Contact's name                                                |         |
|                             | Contact's phone number                                        |         |
|                             | Other field contractors (if more than 1, list on last page)   |         |
|                             | Office location                                               |         |
|                             | Contact's name                                                |         |
|                             | Contact's phone number                                        |         |
|                             | <b>The type of equipment to be used:</b>                      |         |
|                             | Drilling equipment (if more than 3 drills, list on last page) |         |
|                             | Drill #1 make & model                                         |         |
|                             | Drill #2 make & model                                         |         |
|                             | Drill #3 make & model                                         |         |
|                             | Reverse circulation drilling equipment                        |         |
|                             | Drill #1 make & model                                         |         |
|                             | Drill #2 make & model                                         |         |
|                             | Helicopter company                                            |         |
|                             | Office location                                               |         |
|                             | Contact's name                                                |         |
|                             | Contact's phone number                                        |         |
|                             | Helicopter #1 assigned to project                             |         |

| Section #                   | In Compliance with <i>Mine Health and Safety Regulations</i>                                | Details |
|-----------------------------|---------------------------------------------------------------------------------------------|---------|
| 15.02.1<br>(a)<br>continued | Helicopter #2 assigned to project                                                           |         |
|                             | Helicopter #3 assigned to project                                                           |         |
|                             | Location helicopter(s) will be based                                                        |         |
|                             | <b>Number of persons to be employed:</b>                                                    |         |
|                             | Total number of persons to be employed on site                                              |         |
|                             | Program duration total in weeks                                                             |         |
|                             | Field work start date                                                                       |         |
|                             | Field work end date                                                                         |         |
|                             | Accommodation - is there a fully equipped emergency shelter with communication at the camp? |         |
|                             | Carrier providing air support for supply runs to/from camp                                  |         |
|                             | Office location                                                                             |         |
|                             | Contact's name                                                                              |         |
|                             | Contact's phone number                                                                      |         |
|                             | Trip frequency (ex. 1x a week on Fridays)                                                   |         |

# Exploration Safety Plan Form

| Section #   | In Compliance with <i>Mine Health and Safety Regulations</i>                                                                                                                            | Details |
|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| 15.02.1 (b) | <b>A safety program concerning the health and safety of the persons employed in the exploration activities that includes (i) particulars of work practices and employee protection:</b> |         |
|             | Will there be safety meetings, and how frequently will the safety meetings occur?                                                                                                       |         |
|             | What procedure must be followed by the drill crew if bad weather or mechanical problems prevents access to drill site?                                                                  |         |
|             | <b>(ii) Procedures for first aid and prevention of hypothermia:</b>                                                                                                                     |         |
|             | Drill crew                                                                                                                                                                              |         |
|             | Field crew                                                                                                                                                                              |         |
|             | <b>(iii) Procedures for dealing with fire hazards:</b>                                                                                                                                  |         |
|             | Briefly explain what will be done for fire protection at the camp                                                                                                                       |         |
|             | Briefly explain what will be done for fire protection at the drill site                                                                                                                 |         |
|             | <b>(iv) Procedures for explosives handling and use:</b>                                                                                                                                 |         |
|             | Are there explosives on site?                                                                                                                                                           |         |
|             | <b>(v) Procedures for handling equipment and materials when using aircraft:</b>                                                                                                         |         |
|             | Briefly explain what will be done                                                                                                                                                       |         |
|             | <b>(vi) Particulars of survival techniques and survival equipment:</b>                                                                                                                  |         |
|             | Briefly explain for the camp                                                                                                                                                            |         |
|             | Briefly explain for the drill site                                                                                                                                                      |         |

| Section # | In Compliance with <i>Mine Health and Safety Regulations</i>                                                                                                                                                                                                     | Details |
|-----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| 15.02.2   | The owner shall ensure that all employees are trained in the elements of the safety program by a qualified person appointed by the owner and a record of the training shall be maintained at the exploration site and made available to an inspector on request: |         |
|           | Name of qualified person appointed to do the training                                                                                                                                                                                                            |         |
| 15.02.4   | No work shall commence until the safety program is accepted by the Chief Inspector.                                                                                                                                                                              |         |
| 15.03.1   | Before an isolated camp is set up, the owner of the camp shall establish means by which emergency assistance and transportation can be obtained at all times:                                                                                                    |         |
|           | Carrier contracted to perform emergency medical evacuation                                                                                                                                                                                                       |         |
|           | Office location                                                                                                                                                                                                                                                  |         |
|           | Contact's name                                                                                                                                                                                                                                                   |         |
|           | Contact's phone number                                                                                                                                                                                                                                           |         |
|           | Is/are the helicopter(s) on site equipped for medical evacuation using a stretcher?                                                                                                                                                                              |         |
|           | How would a broken neck/back type medical evacuation from the field be handled?                                                                                                                                                                                  |         |
| 15.03.2   | The owner shall ensure that means of communication with all worksites operated from an isolated camp are available at all times:                                                                                                                                 |         |
|           | Communications between camp and outside world                                                                                                                                                                                                                    |         |
|           | Communications between camp and worksite(s)                                                                                                                                                                                                                      |         |
|           | Communications between field crew and camp (helicopter)                                                                                                                                                                                                          |         |
|           | Other communication requirements: Please list.                                                                                                                                                                                                                   |         |
| 15.04     | At exploration drill site, the manager shall ensure that each member of the drill crew has a valid first aid certificate acceptable to the Chief Inspector.                                                                                                      |         |
| 15.05.1   | The person in charge of an exploration site shall ensure that all persons employed at the site are instructed in any potential hazards in the area and are trained in procedures to safeguard themselves against those hazards.                                  |         |



# Exploration Safety Plan Form

| Section # | In Compliance with <i>Mine Health and Safety Regulations</i>                                                                                                                                                                                                               | Details |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| 15.05.2   | <b>The instruction and training referred to in subsection (1) shall include:</b>                                                                                                                                                                                           |         |
| (a)       | (i) Protection from attack by animals                                                                                                                                                                                                                                      |         |
|           | (ii) The wearing of appropriate clothing                                                                                                                                                                                                                                   |         |
|           | (iii) The use of protective equipment                                                                                                                                                                                                                                      |         |
|           | (iv) The need for navigational or directional equipment to avoid becoming lost                                                                                                                                                                                             |         |
| 15.05.2   | <b>Training in:</b>                                                                                                                                                                                                                                                        |         |
| (b)       | (i) The use of the equipment referred to in subparagraphs (a)(iii) and (iv)                                                                                                                                                                                                |         |
|           | (ii) The handling of boats, where necessary                                                                                                                                                                                                                                |         |
|           | (iii) Use of communications equipment in an emergency                                                                                                                                                                                                                      |         |
| 8.38      | <b>To provide for the proper treatment and transportation of persons who may be injured at work, the owner shall supply and make readily accessible to employees, as a minimum, the first aid equipment, supplies, facilities and services specified by this Division:</b> |         |
|           | Briefly explain what will be done as a first aid facility on site                                                                                                                                                                                                          |         |
| 8.39      | <b>First aid equipment, supplies and facilities shall be kept clean, dry and ready for use.</b>                                                                                                                                                                            |         |
| 8.40      | <b>First aid equipment shall meet the requirements of Schedules 1, 2, and 3 unless these regulations specify otherwise or the Chief Inspector orders otherwise:</b>                                                                                                        |         |
|           | List any orders received from the Chief Inspector if they alter from Schedules 1, 2 or 3                                                                                                                                                                                   |         |
| 8.41      | <b>Each employee shall be made aware of the location of first aid for his or her worksite and how to call for first aid.</b>                                                                                                                                               |         |
| 8.42      | <b>Signs clearly indicating the location of, and how to call for, first aid shall be posted conspicuously throughout the mine.</b>                                                                                                                                         |         |

| Section #  | In Compliance with Mine Health and Safety Regulations                                                                                                                                                                                                            | Details |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| 8.43 (a)   | The manager shall ensure that a first aid facility is in the charge of a person who holds a valid St. John Ambulance Advanced First Aid, Level 1 qualification or an equivalent or greater qualification:                                                        |         |
|            | Distance from hospital being greater than 20 minutes - clause 8.48 will apply.                                                                                                                                                                                   |         |
| 8.43 (b)   | Shall only perform duties which allow the prompt response to a request for first aid and the rendering of first aid in a clean and sanitary condition.                                                                                                           |         |
| 8.43 (c)   | Is suitably trained to administer first aid in any area of a mine or exploration site.                                                                                                                                                                           |         |
| 8.44       | There shall be an effective means of communication between the person in charge of the first aid facility and all worksites to be served:                                                                                                                        |         |
|            | How will the first aid person be summoned in an emergency?                                                                                                                                                                                                       |         |
| 8.45       | There shall be effective means of communication for the person in charge of the first aid facility to summon additional assistance:                                                                                                                              |         |
|            | Briefly explain how the medic, administering to a serious injury, can contact the hospital                                                                                                                                                                       |         |
| 8.46       | The first aid facility shall be adequately illuminated, heated and ventilated:                                                                                                                                                                                   |         |
|            | Appropriate arrangements made?                                                                                                                                                                                                                                   |         |
| 8.47.1 (d) | First aid equipment and supplies shall be provided and maintained at the following places: A worksite where diamond drilling equipment is used:                                                                                                                  |         |
|            | What first aid equipment supplies will be provided at the drill site?                                                                                                                                                                                            |         |
| 8.47.1 (g) | Other places where required by an inspector:                                                                                                                                                                                                                     |         |
|            | What first aid equipment supplies will be provided to the field crew?                                                                                                                                                                                            |         |
| 8.47.2     | The equipment and supplies required by subsection (1) shall meet the requirements of Schedule 1, and shall be checked weekly and maintained or replenished as necessary:                                                                                         |         |
|            | Who is responsible to maintain supplies? (Ex. First aid attendant?)                                                                                                                                                                                              |         |
| 8.48 (a)   | Where the time for the surface transportation of a person from a mine to the nearest hospital exceeds 20 minutes, the owner shall: Provide a first aid facility that is provided with first aid equipment and supplies that meet the requirements of Schedule 2. |         |

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