

Mining Form MR-1300

S.C. DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL BUREAU OF LAND AND WASTE MANAGEMENT DIVISION OF MINING AND SOLID WASTE PERMITTING 2600 Bull Street, Columbia, SC 29201

Telephone Number: (803) 898-1362 Fax Number: (803) 898-1426

APPLICATION FOR MODIFYING A MINE OPERATING PERMIT AND/OR RECLAMATION PLAN

Name of Mine: Haile Gold Mine			Permit Number: I-000601
Name of Company: Haile Gold Mine, Inc			County: Lancaster
Home Office Address: 6911 Snowy Owl Road Kershaw, SC 2906	7		
(Street or P.O. Box) Telephone: 803 475 - 2924	(City)	(State)	(Zip)
Mine Office Address: P. O. Box 128 Kershaw, SC 29067			
(Street or P.O. Box) Telephone: 803 475 1220	(City)	(State)	(Zip)
Location of Mine: Haile Gold Mine's entrance is located approximate	ely 2.0 miles n	orth of the jun	oction of SC-29-188 (Haile Gold Mine
(State or County Highway) Road) with US Highway 601.	(near	rest town or city)
REASONS FOR REQUESTING MODIFICATIONS			
Change in the Land Use for Which Affected Land Will Be Re			
Segment or Area: No changes are proposed in anticipated land use	upon the com	pletion of recl	amation
From:	То:		
Describe:			
Change in Reclamation Practices:			
Segment or Area: Add reclamation of the Horseshoe underground (I	JG) mine worl	kings to appro	oved reclamation practices.
From: 2020	To: 2026		
Describe: Primary stopes filled w/ concrete reinforced fill (CRF). Secon	ndary stopes f	illed w/ low-st	rength CRF or waste rock from UG
Change in Schedule of Reclamation			
Segment or Area: Haile Gold Mine Project Schedule (Table 1)			
From: 2029	To: 2032		
Describe: Concurrent reclamation to be practiced during operations, b	ut final reclam	ation will begi	in in 2032 after mining/milling cease
Increase Land Area (attach new map)			
Segment or Area: Haile Gold Mine Project Area			
From: 4540.2 acres	To: 5372.2	acres	
Describe: Increase in total acreage of about 832 acres. Figure 1 comp			Project Area Boundaries

egment or Area: Not Applicable	To:
escribe:	
Other	
	st is to optimize Haile Gold Mine's operation. The accompanying Project
	ptimization plan. In summary, modification of the mine operating permit wou
allow underground mining of the Horseshoe Deposit, inco	rease in mine pit shells from \$950 to \$1,150/troy ounce, increase in Mill
sapacity (from approximately 9,100 tones to 14,400 tons	/day, an increase in tailings storage facility capacity (see attached page)
	Signature of Operator or his Authorized Representative Executive General Manager
Atlantic Specialty Insurance Company	Title February 26, 2021 Date
Atlantic Specialty Insurance Company bove referenced modification and acknowledges at on is approved (CONSENT TO BE OBTAINED BY	Title February 26, 2021 Date as surety, hereby consents to the and agrees that its bond shall remain in effect in the event the modification.
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Power of Attorney

KNOW ALL MEN BY THESE PRESENTS, that ATLANTIC SPECIALTY INSURANCE COMPANY, a New York corporation with its principal office in Plymouth, Minnesota, does hereby constitute and appoint: Brook T. Smith, James T. Smith, Raymond M. Hundley, Jason D. Cromwell, James H. Martin, Deborah S. Neichter, Michele D. Lacrosse, each individually if there be more than one named, its true and lawful Attorney-in-Fact, to make, execute, seal and deliver, for and on its behalf as surety, any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof; provided that no bond or undertaking executed under this authority shall exceed in amount the sum of: unlimited and the execution of such bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof in pursuance of these presents, shall be as binding upon said Company as if they had been fully signed by an authorized officer of the Company and sealed with the Company seal. This Power of Attorney is made and executed by authority of the following resolutions adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

Resolved: That the President, any Senior Vice President or Vice-President (each an "Authorized Officer") may execute for and in behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and affix the seal of the Company thereto; and that the Authorized Officer may appoint and authorize an Attorney-in-Fact to execute on behalf of the Company any and all such instruments and to affix the Company seal thereto; and that the Authorized Officer may at any time remove any such Attorney-in-Fact and revoke all power and authority given to any such Attorney-in-Fact.

Resolved: That the Attorney-in-Fact may be given full power and authority to execute for and in the name and on behalf of the Company any and all bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof, and any such instrument executed by any such Attorney-in-Fact shall be as binding upon the Company as if signed and sealed by an Authorized Officer and, further, the Attorney-in-Fact is hereby authorized to verify any affidavit required to be attached to bonds, recognizances, contracts of indemnity, and all other writings obligatory in the nature thereof.

This power of attorney is signed and sealed by facsimile under the authority of the following Resolution adopted by the Board of Directors of ATLANTIC SPECIALTY INSURANCE COMPANY on the twenty-fifth day of September, 2012:

Resolved: That the signature of an Authorized Officer, the signature of the Secretary or the Assistant Secretary, and the Company seal may be affixed by facsimile to any power of attorney or to any certificate relating thereto appointing an Attorney-in-Fact for purposes only of executing and sealing any bond, undertaking, recognizance or other written obligation in the nature thereof, and any such signature and seal where so used, being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

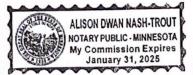
IN WITNESS WHEREOF, ATLANTIC SPECIALTY INSURANCE COMPANY has caused these presents to be signed by an Authorized Officer and the seal of the Company to be affixed this twenty-seventh day of April, 2020.

SEAL 1986

STATE OF MINNESOTA HENNEPIN COUNTY Ву ______

Paul J. Brehm, Senior Vice President

On this twenty-seventh day of April, 2020, before me personally came Paul J. Brehm, Senior Vice President of ATLANTIC SPECIALTY INSURANCE COMPANY, to me personally known to be the individual and officer described in and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn, that he is the said officer of the Company aforesaid, and that the seal affixed to the preceding instrument is the seal of said Company and that the said seal and the signature as such officer was duly affixed and subscribed to the said instrument by the authority and at the direction of the Company.



Notary Public

I, the undersigned, Secretary of ATLANTIC SPECIALTY INSURANCE COMPANY, a New York Corporation, do hereby certify that the foregoing power of attorney is in full force and has not been revoked, and the resolutions set forth above are now in force.

Signed and sealed. Dated 26th day of February 2021

This Power of Attorney expires January 31, 2025 SEAL 1986 OF THE STATE OF THE S

Please direct bond verifications to surely @intactinsurance.com