Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE

✓ New report

Amended report

If amended, provide filing date of report that is being amended.

(YYYY-MM-DD)

ITEM 2 - PARTY CERTIFYING THE REPORT

Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106 (in Québec, Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement Fund Continuous Disclosure).

Investment fund issuer

✓ Issuer (other than an investment fund)

Underwriter

ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS

Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.

Full legal name	West Mining Corp. / West Mining Cor	p.
Previous full legal name	IRONWOOD CAPITAL CORP.	
If the issuer's name changed in	the last 12 months, provide most recent	previous legal name.
Website	www.westminingcorp.ca	(if applicable)
lf the issuer has a legal entity identifier, p	rovide below. Refer to Part B of the Insti	ructions for the definition of "legal entity identifier".
Legal entity identifier		
If two or more issuers distributed a single above.	e security, provide the full legal name(s)	of the co-issuer(s) other than the issuer named
Full legal name(s) of co-issuer(s)		(if applicable)

ITEM 4 - UNDERWRITER INFORMATION If an underwriter is completing the report, provide the underwriter's full legal name, firm NRD number, and SEDAR+ profile number. Full legal name Firm NRD number Firm NRD number SEDAR+ profile number

ITEM 5 - ISSUER INFORMATION

If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.						
a) Primary industry						
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.						
NAICS industry code 212299						
<i>If the issuer is in the mining industry, indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.</i>						
Exploration Development Production Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.						
🗌 Mortgages 🔄 Real estate 🔄 Commercial/business debt 📄 Consumer debt 📄 Private companies						
Cryptoassets						
b) Number of employees						
Number of employees: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🔲 500 or more						
c) SEDAR+ profile number						
Provide the issuer's SEDAR+ profile number						
000044213						

ITEM 6 - INVESTMENT	TEM 6 - INVESTMENT FUND ISSUER INFORMATION						
If the issuer is an investment	fund, provide the follo	wing information.					
a) Investment fund m	anager informatior	1					
Full legal name]			
Firm NRD number		(if applicable)	-			
SEDAR+ profile number							
b) Type of investment	t fund						
Type of investment fund that mo	ost accurately identifies	the issuer (select only one).					
🗌 Money market	Equity	Fixed income	Balanced				
Alternative strategies	Cryptoasset	Other (describe)					

Indicate whether one or bo	oth of the following apply to the investm	ent fund.			
🗌 Invest primarily in ot	her investment fund issuers				
Is a UCITs Fund ¹					
	Investment of Transferable Securities funds (UC schemes to operate throughout the EU on a pa				Jnion (EU) directives
c) Net asset value	e (NAV) of the investment fund				
Select the NAV range of the	e investment fund as of the date of the r	nost recent NAV calc	ulation (Canadi	an \$).	
Under \$5M	S5M to under \$25M	🗌 \$25M to unde	er \$100M	Date of NAV	calculation:
t 100M to updor ¢E0	\Box $f = 0.014$ to upday $f = 1.0$	🗌 \$1B or over			
☐ \$100M to under \$50	0M S500M to under \$1B			YYYY	MM DD
ITEM 7 - INFORMA	TION ABOUT THE DISTRIBU	JTION			
	e of Canada completes a distribution in				
	sers resident in that jurisdiction of Cano es, in connection with the distribution, v				
	the information provided in Schedule 1		seu III iteiii 6. 11	ie injornation	provided in
a) Currency					
Select the currency or curr dollars.	rencies in which the distribution was ma	ide. All dollar amoun	ts provided in ti	he report must	be in Canadian
🖌 Canadian dollar	🗌 US dollar 🛛 Euro Other (d	describe)			
b) Distribution d	atac				
D) DISTIBUTION G	ales				
	and end dates. If the report is being file oth the start and end dates. If the report				
	dates for the distribution period covered		unities distribue	u on u continu	ous busis,
Start date	2024 05 29	End date	2024	05 29	
Start date	YYYY MM DD		YYYY	MM DD	
c) Detailed purch	naser information				
Complete Schedule 1 of	this form for each purchaser and atte	ach the schedule to	the completed	l report.	
d) Types of secu	rities distributed				
, ,	mation for all distributions reported on de. If providing the CUSIP number, indic	, ,			
distributed.		, ,			· · ·
				Canadian \$	
Security CUSIP		Number of	Single or	Highest	
code applicable)	Description of security	securities	lowest price	price	Total amount
UBS 954606208	Jnit, each comprised of one com	4,125,000.0000	0.200	0	825,000.0000
					_

	mon sh	are and o	ne com	mon sha				
	re purc	hase warr	ant					
e) Details	of rights and	convertil	ole/exc	hangeabl	e securities			
	angeable securitie	es were dist				and expiry date for e tio and describe any		
Convertible / exchangeable	Underlying	Exercise (Canad			e (YYYY-MM-	Conversion ratio		be other terms (if
security code	security code	Lowest	Highest	-	DD)			applicable)
WNT	CMS	0.4000	0.4000	2026	5-05-30	1:1		
	•	•						
f) Summa	ary of the distr	ibution b	oy juriso	diction an	d exemptio	n		
	-				•	asers for each jurisd		
located outside o jurisdiction of Ca This table require jurisdiction where	Turisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that furisdiction of Canada only. This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the furisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.						sers resident in that relied on in the	
For jurisdictions v					herwise state t	he country.		
Province or cou		Exemption		-		unique purchasers ^{2a}	Total a	mount (Canadian \$)
Germany		5 2.3 [Accr					1	10,000.0000
Paraguay		5 2.3 [Accr		=			1	75,000.0000
Argentina	NI 45-106	5 2.3 [Accr	edited	investor]			1	2,700.0000
Bahamas	NI 45-106	5 2.3 [Accr	edited	investor]			1	5,000.0000
Alberta	NI 45-106	5 2.3 [Accr	edited	investor]			4	110,000.0000
Ontario	NI 45-106	5 2.3 [Accr	edited	investor]			7	170,000.0000
British Columb	oia NI 45-106	5 2.3 [Accr	edited	investor]		2	.3	452,300.0000
				Total dolla	ar amount of s	ecurities distribute	d	\$825,000.0000
	Total nu	mber of ur	nique pu	rchasers ^{2b}		3	8	
^{2a} In calculating the	number of unique p	urchasers pei	r row, coui	nt each purcha	aser only once. Jo	int purchasers may be co	ounted as one	e purchaser.
^{2b} In calculating the t issuer distributed mu						s, count each purchaser (rchaser.	only once, re	gardless of whether the
g) Net pro	oceeds to the	investme	ent fund	d by jurisc	liction			
If the issuer is an jurisdiction where	investment fund, e a purchaser res eds for that juris	, provide th ides. ³ lf an	e net pro issuer lo	oceeds to th cated outsic	e investment fi le of Canada c	und for each jurisdic ompletes a distributi n Canada, state the j	ion in a jur	isdiction of Canada,
		Provin	ce or co	untry	1	Net proceeds (Canad	dian \$)	
	Т	otal net pr	roceeds	to the inves	tment fund			

³"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

ITEM 8 - COMPENSATION INFORMATION

ŀ

	provides, or will	provide, any coi	106) (in Québec, Regulatior mpensation in connection v ill be, compensated.			
Indicate whether any co □ No ☑ Yes			<i>baid, in connection with the</i> er of persons compensate			
a) Name of per	son compensa	ated and regi	stration status			
Indicate whether the per □ No ☑ Yes	rson compensated	d is a registrant.				
If the person compensat	ted is an individud	al, provide the n	ame of the individual.			
Full legal name of	individual					
If the person compensat	ted is not an indiv	Family name idual, provide tl	First give following information.	n name	Secondary give	en names
Full legal name of	f non-individual	Canaccord Ge	nuity Corp. / Corporation	Canaccord G	enuity	
Firm	n NRD number		(if	applicable)		
Indicate whether the pe	۱ rson compensated	d facilitated the	distribution through a func	ling portal or	an internet-based r	oortal
✓ No ☐ Yes	· · · · ·	,		01	,	
b) Business coi	ntact informati	ion				
lf a firm NRD number is	not provided in It	tem 8(a), provide	e the business contact infor	mation of the	person being com	pensated.
Street address	609 Granville St	reet, Suite 220	0			
Municipality	Vancouver		Province/S	ate British	Columbia	
Country	Canada		Postal code/Zip c	ode V7Y 1H	2	
Email address	info@canaccorc	genuity.com	Telephone num	ber +1 (604) 643-7300	
c) Relationship	to issuer or in	vestment fur	nd manager			
Indicate the person's rel 'connected' in Part B(2) o respecting Prospectus E	ationship with the of the Instructions xemptions) for the	e issuer or invest and the meani purposes of co	tment fund manager (selecting of 'control' in section 1.4 mpleting this section.			
Connected with th			-			
Insider of the issue			-			
Employee of the is			tment fund manager			
\checkmark None of the above						
d) Compensati	on details					

Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.

Cash commissions paid	\$50,100.0000		
Value of all securities distributed as compensation ⁴			
Security codes	Security code 1	Security code 2	Security code 3
Security codes	WNT		
	215,500 finder's v	varrants, each exe	rcisable for one
Describe terms of warrants, options or other rights	common share a	t \$0.20 for 24 mon	ths
Other compensation ⁵			
Describe			
			_
Total compensation paid	\$50,100.0000		
Check box if the person will or may receive any def	erred compensation	on (describe the te	erms below)
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.		-	
⁵ Do not include deferred compensation.			

ITEM 8 - COMPENSATION INFORMATION

whom the issuer directly		ompensation in connection with t	106 respecting Prospectus Exemptions) to the distribution. Complete additional
Indicate whether any co □ No ☑ Yes		<i>paid, in connection with the dist</i> per of persons compensated.	ribution. 3
a) Name of per	son compensated and reg	gistration status	
🗌 No 🗹 Yes	rson compensated is a registran ted is an individual, provide the		
Full legal name of	individual		
If the person compensat	Family nam ted is not an individual, provide	6	ne Secondary given names
Full legal name of	f non-individual Haywood Sec	curities Inc. / Valeurs Mobilieres	s Haywood Inc.
Firi	m NRD number	(if app	licable)
Indicate whether the pe	rson compensated facilitated the	e distribution through a funding (portal or an internet-based portal
√ No □Yes	, ,	6, 5, 6,	,
b) Business coi	ntact information		
lf a firm NRD number is	not provided in Item 8(a), provi	de the business contact informati	ion of the person being compensated.
Street address	200 Burrard Street, 700		
Municipality	Vancouver	Province/State	British Columbia
Country	Canada	Postal code/Zip code	V6C 3L6
Email address	haywoodreception@haywoo d.com] Telephone number	+1 (604) 694-7710
c) Relationship	to issuer or investment fu	und manager	
'connected' in Part B(2)		ning of 'control' in section 1.4 of N	that apply). Refer to the meaning of II 45-106 (in Québec, Regulation 45-106
Connected with th	e issuer or investment fund m	anager	
🗌 Insider of the issue	er (other than an investment fu	und)	
	of the investment fund or inve	-	
	suer or investment fund mana	ager	
✓ None of the above			

d) Compensation details

Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.

Cash commissions paid	\$2,289.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
	WNT			
Describe terms of warrants, options or other rights				
Other compensation ⁵				
Describe				
Total compensation paid	\$2,289.0000			
Check box if the person will or may receive any def	erred compensati	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as compensatives of the issuer. Indicate the security codes for all securities distacquire additional securities of the issuer.				
⁵ Do not include deferred compensation.				

ITEM 8 - COMPENSATION INFORMATION

whom the issuer directly		mpensation in connection with t	106 respecting Prospectus Exemptions) to he distribution. Complete additional
Indicate whether any co □ No ☑ Yes	mpensation was paid, or will be If yes, indicate numb	Г	ribution. 3
a) Name of per	son compensated and reg	istration status	
🗌 No 🗹 Yes	rson compensated is a registrant		
lf the person compensa	ted is an individual, provide the r	name of the individual.	
Full legal name of	individual		
If the person compensat	Family name ted is not an individual, provide t	0	e Secondary given names
Full legal name of	f non-individual Ventum Finar	ncial Corp.	
Firr	m NRD number	(if app	licable)
Indicate whether the pe	rson compensated facilitated the	distribution through a funding p	portal or an internet-based portal
🗹 No 🗌 Yes			
D) BUSINESS COI	ntact information		
lf a firm NRD number is	not provided in Item 8(a), provia	le the business contact informati	on of the person being compensated.
Street address	40 King Street, 3401		
Municipality	Toronto	Province/State	Ontario
Country	Canada	Postal code/Zip code	M5H 3Y2
Email address	vancouver.reception@ventu mfinancial.com	Telephone number	+1 (647) 782-2400
c) Relationship	to issuer or investment fu	nd manager	
'connected' in Part B(2)		ing of 'control' in section 1.4 of N	hat apply). Refer to the meaning of I 45-106 (in Québec, Regulation 45-106
Connected with th	e issuer or investment fund ma	anager	
🗌 Insider of the issue	er (other than an investment fu	nd)	
	of the investment fund or inve	-	
Employee of the is	suer or investment fund mana	ger	
✓ None of the above			

d) Compensation details

Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.

Cash commissions paid	\$3,500.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1 WNT	Security code 2	Security code 3	
Describe terms of warrants, options or other rights				
Other compensation ⁵				
Describe				
Total compensation paid	\$3,500.0000			
Check box if the person will or may receive any def	erred compensation	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.				

⁵Do not include deferred compensation.

ITEM 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER

If the issuer is an investment fund, do not complete Item 9. Proceed to Item 10.

Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one).

Reporting issuer in a jurisdiction of Canada

Foreign public issuer

Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶

Provide name of reporting issuer

Wholly owned subsidiary of a foreign public issuer ⁶

Provide name of foreign public issuer

□ Issuer distributing only eligible foreign securities and the distribution is to permitted clients only ⁷.

If the issuer is at least one of the above, do not complete Item 9(a) - (c). Proceed to Item 10.

⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer

or the foreign public issuer, respectively.

⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.

□ If the issuer is none of the above, check this box and complete Item 9(a) – (c).

a) Directors, executive officers and promoters of the issuer

Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.

Organization or company name	Family name	First given	Secondary given names	Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)			
	name of the second seco		Province or country	D	0	Р		

b) Promoter information

If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.

Organization or	Family	First given	, , ,	Residential jurisdiction of individual	Relationship to one or both	promoter (select if applicable)
company name	name	name	names	Province or country	D	0

c) Residential address of each individual

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer, director or agent of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar to that of a director of of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may be delegated, but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report in Item 11.

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exempt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

Name of Issuer/ investment fund manager/agent	West Mining Corp.								
Full legal name	VATANCHI	Nader							
	Family name	First given name		Secondary given names					
Title	CEO								
Telephone number	+1 (778) 840-9664	Email address	nadervatanchi@hotmail.com						
Signature	"Nader Vatanchi"	Date	2024 YYYY	06 07 MM DD					

ITEM 11 - CONTACT PERSON

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.

Same as individual certifying the report

Full legal name	RAVEN	Michael	
	Family name	First given name	Secondary given names
Title	Solicitor		
Name of company	Beadle Raven LLP		
Telephone number	+1 (604) 899-6401	Email address mrav	en@beadleraven.com

NOTICE – COLLECTION AND USE OF PERSONAL INFORMATION

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation. If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedule 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.