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	aprock Mining Corp. / Caprock Mining Corp.					
Previous full legal name	CAPROCK MINING CORP. (FORMERLY BLINGOLD CORP.)					
If the issuer's name changed in	in the last 12 months, provide most recent previous legal name.					
Website	WWW.CAPROCKMINING.COM (if applicable)					
If the issuer has a legal entity identifier, p	rovide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".					
Legal entity identifier						
lf two or more issuers distributed a single above.	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	(if applicable)	
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
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.
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
000052216

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

Indicate whether one or k	ooth of the following apply to the investm	nent fund.					
🗌 Invest primarily in o	ther investment fund issuers						
Is a UCITs Fund ¹							
	¹ Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives						
that allow collective investmen	that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.						
c) Net asset valu	ue (NAV) of the investment fund						
Select the NAV range of th	he investment fund as of the date of the r	most recent NAV calcu	lation (Canadic	n \$)			
	_			Date of NAV	calculation:		
Under \$5M	\$5M to under \$25M	Section \$25M to unde	r\$100lvi				
🗌 \$100M to under \$50	00M 🗌 \$500M to under \$1B	🗌 \$1B or over	L	ΥΥΥΥ	MM DD		
ITEM 7 - INFORMA	ATION ABOUT THE DISTRIBL	JTION					
If an issuer located outsid	de of Canada completes a distribution in	a jurisdiction of Cano	ida include in l	tem 7 and Sci	hadula 1		
	asers resident in that jurisdiction of Can						
commissions or finder's f	fees, in connection with the distribution, w	which must be disclos					
Item / must reconcile wit	h the information provided in Schedule 1	l of the report.					
a) Currency							
Select the currency or cur dollars.	rrencies in which the distribution was ma	ıde. All dollar amount	s provided in th	e report mus	t be in Canadian		
					1		
🗹 Canadian dollar	US dollar Euro Other (describe)			J		
b) Distribution o	Jates						
State the distribution sta	rt and end dates. If the report is being file	ed for securities distril	buted on onlv o	ne distributio	n date. provide		
the distribution date as b	ooth the start and end dates. If the report	is being filed for secu					
include the start and end	dates for the distribution period covered	d by the report.					
Start date	2024 12 31	End date	2024	12 31			
	YYYY MM DD		YYYY	MM DD			
c) Detailed purc	haser information						
c) Detailed pure							
Complete Schedule 1 of	f this form for each purchaser and atte	ach the schedule to a	the completed	report.			
d) Types of secu	urities distributed						
Provide the following info	ormation for all distributions reported on	a per security basis.	Refer to Part A(12) of the Inst	ructions for how		
to indicate the security co	ode. If providing the CUSIP number, indic						
distributed.							
				Canadian \$			
Security CUSIP		Number of	Single or	Highest			
code number (if applicable)	Description of security	securities	lowest price	price	Total amount		
CMS		8,000,000.0000	0.050	0	400,000.0000		
	<u> </u>			1	1		

FTU	Each FTU is comprised of one flo w-through common share and on e purchase warrant	2,875,000.0000	0.0400	115,000.0000
UBS	Each UBS is comprised of one co mmon share and one purchase w arrant	11,685,000.0000	0.0250	292,125.0000

e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

Convertible / exchangeable	Underlying security code		se price dian \$)	Expiry date (YYYY-MM- DD)	Conversion ratio	Describe other terms (if applicable)
security code	security coue	Lowest	Highest	50)		
WNT	CMS	0.0600		2026-12-31		FTU
WNT	CMS	0.0600		2026-12-31		UBS

f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction 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 jurisdiction 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 jurisdiction 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.

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Exemption relied on	Number of unique purchasers ^{2a}	Total amount (Canadian \$)			
Alberta	NI 45-106 2.3 [Accredited investor]	1	5,000.0000			
British Columbia	NI 45-106 2.3 [Accredited investor]	3	250,125.0000			
Québec	NI 45-106 2.3 [Accredited investor]	8	152,000.0000			
Ontario	NI 45-106 2.13 [Petroleum, natural gas and mining properties]	1	400,000.0000			
	Total dollar amount of securities distributed					
	Total number of unique purchasers ^{2b} 13					

^{2a} In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

^{2b}In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

g) Net proceeds to the investment fund by jurisdiction

*If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.*³*If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise*

state the country.			
	Province or country	Net proceeds (Canadian \$)	
	Total net proceeds to the investment fund		
,	s the gross proceeds realized in the jurisdiction from the distributions for stributions for the distributions for the stribution period covered by the report.	or which the report is being filed, le	ss the gross redemptions that

ITEM 8 - COMPENSATION INFORMATION

Provide information for each p whom the issuer directly provi copies of this page if more t l	des, or will provide, any co	ompensation in cor	nection with the dis		
Indicate whether any compens □ No ☑ Yes	ation was paid, or will be If yes, indicate numb			on.	
a) Name of person o	ompensated and reg	istration status			
Indicate whether the person co	ompensated is a registrant				
🗌 No 🗹 Yes					
If the person compensated is a	n individual, provide the i	name of the indivia	ual.		
Full legal name of individ	lual				
If the person compensated is r	Family name not an individual, provide a		First given name nation.	Secondary giv	ven names
Full legal name of non-i	ndividual EMD FINANCI	AL INC. / LA FINAI	NCIÈRE EMD INC.]
Firm NRD	number 36480		(if applicabl	e)	
Indicate whether the person co	ompensated facilitated the	e distribution throu	gh a funding portal	or an internet-based	portal
🗹 No 🗌 Yes					
b) Business contact	information				
If a firm NRD number is not pr	ovided in Item 8(a) provid	le the husiness con	tact information of	the nerson heing com	nensated
Street address					
Municipality		Pr	ovince/State		
Country		Postal co	de/Zip code		
Email address		Teleph	one number		
c) Relationship to iss	suer or investment fu	nd manager			
Indicate the person's relations 'connected' in Part B(2) of the I respecting Prospectus Exempti	nstructions and the mean	ing of 'control' in se	ection 1.4 of NI 45-1		
Connected with the issue	er or investment fund ma	anager			
Insider of the issuer (oth		-			
Director or officer of the			ager		
 Employee of the issuer o None of the above 	r investment fund mana	ger			
d) Compensation de	tails				

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.

\$6,000.0000		
Security code 1	Security code 2	Security code 3
CMS	UBS	WNT
the broker to pur Each Unit is comp one purchase wa	chase one Unit at prised of one com rrant, with each W	\$0.025 per Unit. non share and 'arrant issued at
\$6,000.0000]
erred compensatio	on (describe the te	rms below)
	-	•
	CMS 150,000 compens the broker to pur Each Unit is comp one purchase wa an exercise price 2026 \$6,000.0000 erred compensations, tion, excluding options,	Security code 1 Security code 2 CMS UBS 150,000 compensation options. Eac the broker to purchase one Unit at Each Unit is comprised of one commone purchase warrant, with each W an exercise price of \$0.06, expiring 2026

ITEM 8 - COMPENSATION INFORMATION

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Provide information for each person (as defined in NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions)) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.							
Indicate whether any co □ No ☑ Yes	Indicate whether any compensation was paid, or will be paid, in connection with the distribution. No Yes If yes, indicate number of persons compensated. 3						
a) Name of per	rson compensa	ited and regi	istration	status			
Indicate whether the pe ✓ No □ Yes If the person compensa		-		individual			
Full legal name of		, provide the h		mainaaan.			
If the person compensa	L	Family name dual, provide th	he following	First given nam g information.	e	Secondary give	en names
Full legal name of	f non-individual	Bullrun Capita	l Inc.				
Firi	m NRD number			(if app	licable)		J
Indicate whether the pe	∟ rson compensated	facilitated the	distributio	n through a funding r	oortal or a	n internet-based r	oortal
✓ No □ Yes	p	,					
b) Pusiposs so	otact informati	<u></u>					
D) Business Col	ntact informatio	011					
lf a firm NRD number is	not provided in Ite	em 8(a), provide	e the busin	ess contact informati	on of the p	person being com	pensated.
Street address	10589 Ladner Tr	runk Road					
Municipality	Delta			Province/State	British C	olumbia	
Country	Canada		Po	ostal code/Zip code	V4G1K2		
Email address	kal@bullruncapi	tal.ca		Telephone number	+1 (604)	805-4602	
c) Relationshin	to issuer or inv	vestment fur	nd manag	σer			
Indicate the person's rel 'connected' in Part B(2) respecting Prospectus E	lationship with the of the Instructions xemptions) for the	issuer or invest and the meanii purposes of co	tment fund ng of 'contr mpleting ti	- l manager (select all t rol' in section 1.4 of N			
Connected with th							
Director or officer				d manager			
Employee of the is							
✓ 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	\$20,010.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
Security codes	CMS	UBS	WNT	
Describe terms of warrants, options or other rights				
Other compensation ⁵				
Describe				
			_	
Total compensation paid	\$20,010.0000			
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 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

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Provide information for each person (as a whom the issuer directly provides, or will copies of this page if more than one pe	provide, any compensati	on in connectio			
Indicate whether any compensation was No If yes,	paid, or will be paid, in co indicate number of per				
a) Name of person compensa	ated and registratior	n status			
Indicate whether the person compensated	d is a registrant.				
☐ No ✓ Yes If the person compensated is an individuo	al provide the name of th	ne individual			
Full legal name of individual					
If the person compensated is not an indiv	Family name vidual, provide the follow		given name 1.	Secondary give	n names
Full legal name of non-individual	LEEDE FINANCIAL INC.	/ LEEDE FINAI	NCE INC.		
Firm NRD number	5770		(if applicable)		
Indicate whether the person compensated	d facilitated the distribut	ion through a f	unding portal or a	an internet-based po	ortal
✓ No Yes		on an oagn a j			
b) Business contact informat	ion				
If a firm NRD number is not provided in It	tem 8(a), provide the bus	iness contact ir	nformation of the	person being comp	ensated.
Street address					
Municipality		Provinc	e/State		
Country		Postal code/Z	ip code		\exists
Email address		Telephone n	umber		\exists
]
c) Relationship to issuer or in	vestment fund man	ager			
Indicate the person's relationship with the 'connected' in Part B(2) of the Instructions respecting Prospectus Exemptions) for the	s and the meaning of 'cor	ntrol' in section			
Connected with the issuer or invest	tment fund manager				
🗌 Insider of the issuer (other than an	investment fund)				
Director or officer of the investmer	nt fund or investment fu	ind manager			
Employee of the issuer or investme	ent fund manager				
\checkmark 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	\$3,200.0000		
Value of all securities distributed as compensation ⁴			
Security codes	Security code 1	Security code 2	Security code 3
Security todes	CMS	UBS	WNT
Describe terms of warrants, options or other rights Other compensation ⁵ Describe	the broker to pur Each Unit is comp one purchase wa	ation options. Each chase one Unit at prised of one com rrant, with each W of \$0.06, expiring	\$0.025 per Unit. mon share and /arrant issued at
Total compensation paid	\$3,200.0000		7
Check box if the person will or may receive any def		on (describe the te	erms below)
⁴ Provide the aggregate value of all securities distributed as compensative value of all securities distributed as compensative value of all securities and the securities of			
securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.	tributed as compensation	on, <u>including</u> options, v	varrants or other righ

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		onship to t all that a	
		name		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 name	First given name	Secondary given names	Residential jurisdiction of individual	Relationship to one or both i	•
company name	name	name	names	Province or country	D	Ο

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 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	Caprock Mining Corp.			
Full legal name	GUPTA	Vis	hal	
	Family name	First give	en name	Secondary given names
Title	President & CEO			
Telephone number	+1 (647) 466-0506	Email address	vgupta@capi	ockmining.com
Signature	/s/ "Vishal Gupta"	Date	2025 YYYY	01 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 c	ertifying the report		
Full legal name	Matanovic	Anna	
	Family name	First given name	Secondary given names
Title	Securities Law Clerk		
Name of company	FOGLER, RUBINOFF LLP		
Telephone number		Email address	amatanovic@foglers.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.