For filings with the FSA include the annex For filings with issuer exclude the annex

TR-1: NOTIFICATION OF MAJOR INTEREST IN SHARES

1. Identity of the issuer or the underlying issuer of existing shares to which voting rights are attached: "		Churchill Mining Ord 1p		
2 Reason for the notification (please tick the	appro	oriate box or boxes):		
An acquisition or disposal of voting rights			Yes	
An acquisition or disposal of qualifying financial instruments which may result in the acquisition of shares already issued to which voting rights are attached			No	
An acquisition or disposal of instruments with similar economic effect to qualifying financial instruments			No	
An event changing the breakdown of voting rights			No	
Other (please specify):				
3. Full name of person(s) subject to the notification obligation: iii		J O Hambro Investment Manager	nent Limited	
4. Full name of shareholder(s) (if different from 3.):		n/s		
5. Date of the transaction and date on which the threshold is crossed or reached: $^{\vee}$		26.11.2010		
6. Date on which issuer notified:		29.11.201		
7. Threshold(s) that is/are crossed or reached: vi, vii		3%		

s:						
attached to	shares ^{viii,}	İX				
		Resulting s	ituation afte	r the triggeri	ng transaction	1
Number of	Number of shares Voting Rights Number of shares Direct			% of voting rights *		
1		Direct xi	Indirect xii	Direct	Indirect	
2,941,226	2,941,226	2,844,885	2,844,885		2.94%	
	attached to Situation pr to the trigge transaction Number of Shares	attached to shares viii, Situation previous to the triggering transaction Number Number of of Shares Voting Rights	attached to shares vili, x Situation previous to the triggering transaction Number Number of of of shares Shares Voting Rights Resulting s Resulting s Provide the substitution of shares Number of of shares Direct	Situation previous to the triggering transaction Number of of Shares Noting Rights Nitial Number of Shares Direct Direct	Situation previous to the triggering transaction Number of of Shares Voting Rights Resulting situation after the triggering situation after situati	Situation previous to the triggering transaction Number of of Shares Noting Resulting situation after the triggering transaction Number of of Shares Number of Shares

Resulting situation a	fter the triggering	transaction		
Type of financial instrument	Expiration date xiii	Exercise/ Conversion Period ^{xiv}	Number of voting rights that may be acquired if the instrument is exercised/ converted.	% of voting rights
			OXOTOGOGA CONTOURS	

Resulting situation	after the trig	gering transa	ction			
Type of financial Exercise price	Exercise price			Number of voting rights instrument refers to	% of voting rights xx	
					Nominal	Delta

Total (A+B+C)	
Number of voting rights	Percentage of voting rights
2,844,885	2.94%

9. Chain of controlled undertakings through which the voting rights financial instruments are effectively held, if applicable: XXI		
Proxy Voting:		
10. Name of the proxy holder:	N/A	
11. Number of voting rights proxy holder will cease to hold:	N/	
12. Date on which proxy holder will cease to hold voting rights:	N//	
13. Additional information:		
14. Contact name:		
15. Contact telephone number:		

Note: Annex should only be submitted to the FSA not the issuer

Annex: Notification of major interests in shares^{xxii}

A: Identity of the persons or legal entity subject to the notification obligation					
Full name (including legal form of legal entities)	J O Hambro Investment Management Limited				
Contact address (registered office for legal entities)	21 St James's Square London SW1Y 4HB				
Phone number & email	020 7484 7484 compliance@johim.co.uk				
Other useful information (at least legal representative for legal persons)					
<u> </u>					
B: Identity of the notifier, if applicable					
Full name					
Contact address					
Phone number & email					
Other useful information (e.g. functional relationship with the person or legal entity subject to the notification obligation)					
C: Additional information					
C: Additional information					

For notes on how to complete form TR-1 please see the FSA website.