

**AGENDA**  
**SPECIAL JOINT COUNCIL MEETING**  
**MUNICIPAL DISTRICT OF PINCHER CREEK NO. 9**  
**December 17, 2025**  
**6:00 pm**  
**(Dinner at 5:30 pm)**  
**MD Council Chambers**

**A. ADOPTION OF AGENDA**

**B. DELEGATIONS**

- a) 6:00 pm to 6:30 pm - Pincher Creek & District Library Board
- b) 6:30 pm to 6:45 pm - RIPPLE Fund Update (Dan Crawford and Andrea Hlady)

**C. NEW BUSINESS**

- a) Regional Water Supply Mitigation Strategy (Drought Projects Assessment) - MD
- b) Airport Development – MD
- c) Captus Generation – MD
- d) Update on the Memorial Community Centre Arena upgrade plans – Town
- e) Cabin Fever 2026 – Healthcare Committee
- f) AB Muni – Town

**D. NEW BUSINESS**

**E. CLOSED MEETING SESSION**

- a) Update on Pincher Creek Community Early Learning Centres - ATIA – Sec 19.1

**F. ADJOURNMENT**

## BACKGROUND

- The MD of Pincher Creeks (MD) raw water source on the Oldman Reservoir was severely affected by the 2023 drought at significant operational cost. Water was hauled and temporary pumping setup for over 8 months in order to meet our potable water demands. The MD was in a Stage 4 (of 5) water restriction for 10 months and constructed two (2) additional drought resilient intakes on an expedited timeline during the crisis.
- Testing of the new intakes indicated that they can meet the MD's current system demands during periods of drought. However, they will likely be unable to keep up with maximum daily forecasted demands of the system come 2050.
- To deal with this forecasted supply gap, the MD initiated a ***Regional Drought Supply & Strategic Implementation Study*** earlier this year to assess the best long term option to meet water demands during periods of drought.

## REGIONAL DROUGHT SUPPLY & STRATEGIC IMPLEMENTATION STUDY

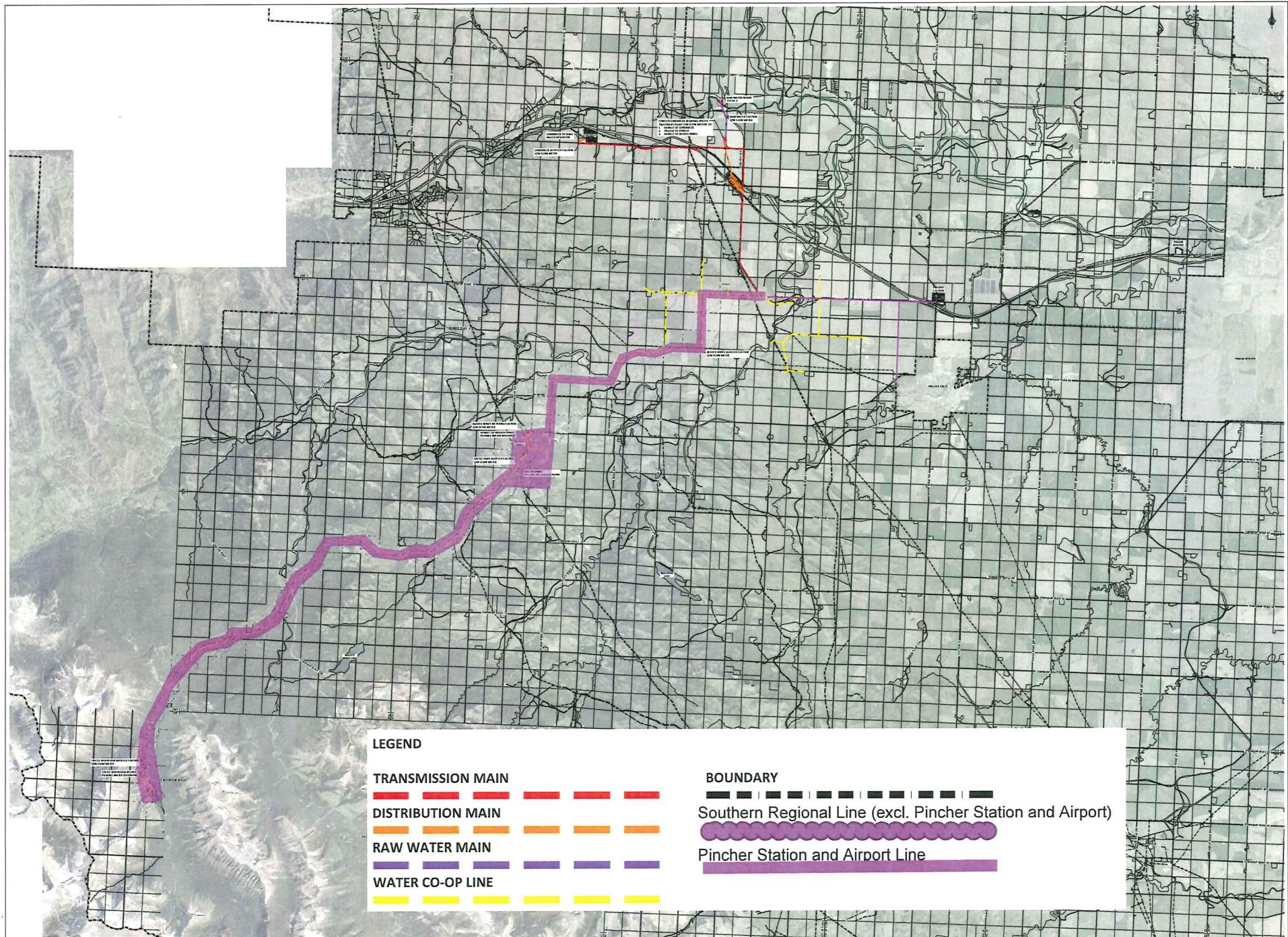
- Among other options, a potable water interconnection with the Town is being studied to meet system demands during drought. The Town's intake infrastructure and historic priority licenses are less vulnerable to the perils of drought than the MD's.
- The ideal routing of such an interconnection would require a booster pump station near the Town's water plant and a pipeline system ran North-West, crossing the Castle River West of the Airport (routing shown in *ATTACHMENT #1* along with remainder of MD transmission system).
- This routing would have the added bonus of easily servicing the Pincher Creek Airport and Pincher Station (currently not serviced).

## TOWN OF PINCHER CREEK LICENSE LIMITATIONS, MD WATER DEMAND

- The MD's water demand may (conservatively) grow from ~110,000 m<sup>3</sup>/yr to up to 249,000 m<sup>3</sup>/yr in 2050 (current Hamlet's and CMR only).
- Adding the Airport and Pincher Station is anticipated to increase forecasted demand by up to 100,000 m<sup>3</sup>/yr (see *ATTACHMENT #2*)
- Currently, the Town has 1,816,729 m<sup>3</sup>/yr water license for potable use (excludes golf course license). The MD has 296,539 m<sup>3</sup>/yr (including Cowley).
- Without major upgrades, the MD's system could not meet both Town and MD forecasted demands in the event of a major upset or long term drought. It is anticipated that the Town's infrastructure could meet the MD's forecasted demands.

## AIRPORT AND PINCHER STATION INTERCONNECTION/EXPANSION

- We are working to determine if the Town/MD interconnection across the Castle River is the most viable option to curb drought perils in the ***Regional Drought Supply & Strategic Implementation Study***.
- Regardless of the outcome, it makes more sense for the Town to serve the Pincher Creek Airport and Pincher Station with water due to proximity of existing infrastructure and limitations of both Town and MD systems.
- The MD has briefed Town Administration on the ***REGIONAL DROUGHT SUPPLY & STRATEGIC IMPLEMENTATION STUDY*** and we anticipate having cost estimates for the pumping and pipeline portion of the work (no distribution) in 2026.



Scenario A: Town supplies Pincher STN and Airport only

Scenario B: Town supplies Pincher STN, Airport, and Southern Regional Line

Scenario	Current Projected Flows for Regional Water Connection						
	Annual		Summer		Winter		
	Total (m3/yr)	ADD (m3/day)	MDD (m3/day)	ADD (m3/day)	MDD (m3/day)	ADD (m3/day)	MDD (m3/day)
Pincher Station and Pincher Airport	3,179	9	37	11	46	7	29
Southern Regional Line	45,978	126	437	125	436	124	458
Complete Regional Supply	110,492	303	1,013	343	1,013	262	849

Scenario	Projected (2050) Flows for Regional Water Connection						
	Annual		Summer		Winter		
	Total (m3/yr)	ADD (m3/day)	MDD (m3/day)	ADD (m3/day)	MDD (m3/day)	ADD (m3/day)	MDD (m3/day)
Pincher Station and Pincher Airport	110,691	303	373	303	373	303	373
Southern Regional Line	245,410	672	1,349	625	1,173	720	1,296
Complete Regional Supply	359,975	986	2,199	1,012	2,199	965	1,990

Scenario C: Town supplies entire regional network



## Captus Generation Data Center



### About Captus

Captus will provide power utility services to data center customers through a combination of building gas-fired power generation facilities and an existing grid connection. Captus can also provide carbon abated power through its carbon capture infrastructure.

Captus owns approximately 825 acres of industrial land which can house in excess of 1.2GW of power generation and multiple co-located data center campus developments.

### Contact

**Harry Anderson**  
(403) 554 2692

handersen@CaptusGeneration.com

**Eric Gallie**  
(236) 333 6061

Eric.Gallie@CaptusGeneration.com

### Site Plan



### Location Map



#### Location

Pincher Creek, Alberta, Canada

#### Latitude / Longitude

49.316000, -113.800000

#### Acreage

825 Industrial Zoned Acres

#### Total Site Power

1,200 MW planned in phases of 400 MW

#### PUE

Target of 1.15 PUE (Average Ambient Temp 39°F)

#### Phasing of Power Availability

240 MW / Q3 2027 at 99.99% Reliability  
400 MW 2029 at 99.99% Reliability  
With 800+ MW Future Expansions at 99.99% Reliability

#### Initial Utility

74.8 MW Grid Secured +  
On Site Natural Gas Gen.

#### Fiber Providers

Multiple Dark Fiber Providers with ability to provide diverse non-SPOF  
WAN degrees

#### Product Offering

Powered Land/Powered Shell

#### Zoning

Heavy Industrial Zoned

**IT IS THEREFORE RESOLVED THAT** Alberta Municipalities advocate on behalf of rural and remote communities that the Government of Alberta immediately appoint a separate and dedicated general practitioner (GP) Generalist, and/or nurse practitioner as a voting member to the Health System Integration Council and within the new health board leadership structure to ensure that those who serve Albertans who live in rural and remote communities have an appropriate and continuous voice for their health care. Whereas Clauses

**WHEREAS** the Government of Alberta announced the "Refocusing Alberta's Health Care System Initiative" to improve health outcomes and empower health care workers to deliver quality care across the province on November 8, 2023;

**WHEREAS** Ministerial Order 300/2024 established the Integration Council and its terms of reference;

**WHEREAS** the terms of reference states that the Integration Council will be chaired by the Minister of Health, with support from the Minister of Mental Health and Addiction, the Minister of Seniors, Community and Social Services, and will have members from each new sector-specific provincial health agency;

**WHEREAS** the Government of Alberta released the Rural Health Action Plan 2024-2027, in October 2024, which states that "The discrepancies between the health care available to Albertans in and around large urban centres and those who live in rural or remote communities, has been a growing concern for many years. These communities face unique health care challenges that call for creative solutions that create more equitable access to health care that they want and deserve.";

**WHEREAS** the Integration Council is missing the voice of health practitioners who have direct experience serving rural and remote areas. For example, a rural generalist is a general practitioner (GP), who provides a broad scope of medical care in a rural or remote setting. This includes comprehensive primary care, emergency medicine, and often specialized services like obstetrics, anesthesia, or mental health, tailored to the unique needs of the community. They are essential for ensuring access to healthcare in areas where resources and specialized services may be limited; and

#### Resolution Background

The Rural Municipalities of Alberta (RMA) adopted a similar resolution at their Spring 2025 Convention, resolution 5-25S, submitted by Mountain View County. The Town of Sundre recommends that ABmunis seek to collaborate with RMA in advocating for the inclusion of a rural based GP on the Integration Council. Rural and remote communities face health care challenges that are distinct from those faced by large urban communities, including limited access to specialists, lengthy travel times for care, and fewer resources to address mental health, continuing care, and addiction services. Additionally, key decision-making bodies lack adequate rural and remote community Generalists which perpetuates systemic inefficiencies and disparities in care for rural

and remote communities while failing to acknowledge the distinct needs of these communities.

The province's shift to a new integrated healthcare system – organized into four divisions: Primary Care, Acute Care, Continuing Care and Mental Health and Addictions – offers an opportunity to address these issues. However, the current structure of the Integration Council does not include a designated Generalist who can provide critical insight into the realities of rural and remote community's health care.

We encourage and request that Alberta Municipalities advocate on behalf of rural and remote communities for the Government of Alberta to consider their unique needs before making decisions.

The Integration Council's purpose, as defined by M.O. 300/2024 is:

- Identify means of integration of a single functioning health care system at the highest level of governance;
- Identify means of integration of the four new organizations;
- Identify efficiencies and means to remove barriers to the health system integration and to the patient journey;
- Monitor key outcomes of the Refocus initiative and support public reporting on performance of the health system related to the Refocus initiative so Albertans know if their health system is delivering better health outcomes for Albertans; and
- Identify deliberate change management strategies throughout the health system to support the Refocus initiative.

The current structure of the Integration Council is listed below (*subject to change or as amended from time to time*):

**VOTING MEMBERS**

Minister, Health

Minister, Mental Health

Minister, Seniors, Community and Social Services

Deputy Minister, Health

Deputy Minister, Mental Health

Deputy Minister, Seniors, Community and Social Services

Chair, Alberta Health Services Board

CEO, Recovery Alberta

CEO, Primary Care Alberta

Managing Director, Procurement and Optimization (Health)

**NON-VOTING MEMBERS**

Minister, Technology and Innovation

Deputy Minister, Technology and Innovation

Chair, Health Quality Council of Alberta Board

CEO, Health Quality Council of Alberta

CEO, Canadian Center Recovery Excellence

It is recognized that a member duly appointed to the Integration Council, the Honourable Jason Nixon, Minister of Assisted Living and Social Services (*May 16, 2025*), is also the Member of the Legislature for the Rimbey-Rocky Mountain House-Sundre electoral district, consisting of rural and remote communities. However, ministerial appointments change and it is important that the council always have a voice of those who provide services in rural areas. The end goal is not just to benefit rural Albertans but also alleviate demand on healthcare services in larger urban areas. A rural and remote community Generalist on the Integration Council and the new Health Care Leadership Board would provide an invaluable perspective on the challenges faced by patients located in these communities, from communication in referrals to navigating broader social determinants of health. It is crucial that rural and remote communities, which often rely heavily on team-based care models, have a voice in shaping health care policies and systems that affect them. Appointing a dedicated Generalist to the Integration Council and new Health Care Leadership Board will help ensure that Alberta's health care system delivers equitable and effective care for all Albertans, regardless of geography.

#### Alberta Municipalities notes

ABmunis has not previously advocated on this specific issue; however, we have called for the province to meaningfully engage municipalities of all sizes in planning for healthcare needs.

Since this resolution is passed, it will be forwarded to the Government of Alberta for response. Further advocacy will be determined by ABmunis' Board based on input from ABmunis' relevant policy committee within the context of ABmunis' priorities and positions.