

Submitted to the Canadian Transportation Agency (Form submission)

Subject: Consultation on the Application for Authorization of the Lac-Mégantic Rail Bypass Project

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Please see my critical analysis of the UDA report attached

Attachement No1

Critical analysis of the Independent hydrogeological expertise of Groupe Conseil UDA inc., final version of 17 June 2026 (the “UDA Report”) — Lac-Mégantic rail bypass proposed route.

Filed: 29 June 2026

By: Kurt Lucas

1. Who I am, and why I write

I am trained as a critical-care pharmacist and a health economist. I am a resident of the communities this project would impact. I file these observations from the standpoint of the two disciplines I have practiced for several years.

I do not oppose a rail bypass. My objection is narrow and specific: on the present record, the proposed *location* cannot be declared suitable under section 98, because it places a protected drinking-water source at irreversible risk that the Agency’s own independent expert says the file does not adequately manage.

2. First, do no harm. What does this record actually show?

My clinical training is governed by a single ordering principle: *primum non nocere* — first, do no harm. When I read the UDA Report through that lens, I cannot reconcile it with an approval. The record before the Agency monitors the aquifer; it does not protect it.

UDA — the Agency’s own independent expert names the principal risk of this project in plain terms: the loss of access to safe drinking water for residents using private wells in Frontenac, Lac-Mégantic and Nantes (*UDA Report, Executive Summary, p. 2 of 3*). It characterizes the project’s effects on groundwater as « *permanents et irréversibles* » — permanent and irreversible (*UDA Report, s. 8.1, p. 8-1*); its own residual-effects table (Table 5-1) rates effects as « *Irréversible*

» at a consequence level reaching « *importante* » (*UDA Report, Table 5-1, effect E-1, p. 5-15/5-16*).

And it describes the management regime, candidly, as « *principalement réactive* » — principally reactive (*UDA Report, s. 8.1, p. 8-1*). A clinician understands exactly what that means. Monitoring detects harm after it occurs; it does not prevent it. Surveillance is a diagnosis, not a treatment. When the harm in question is irreversible damage to a drinking-water source, detection after the fact is not protection — it is the documentation of a loss. UDA itself flags the absence of an emergency protocol for loss of water access as a « *lacune importante* » — a significant gap (*UDA Report, s. 8.1, p. 8-1*).

The scale of the disturbance is not marginal. Working from the promoter's own Englobe and AECOM data, Professor Sébastien Raymond (Ph.D., ing.) documents drawdowns reaching 23 metres and zones of influence extending up to 1.2 kilometres, with construction taking place directly within the water table (*Raymond Opinion, 23 November 2022*). Against that, the promoter limits its protective commitment to wells within 200 metres of the right-of-way (*TC/CMQ Response, 12 June 2026, p. 2*). A 200-metre commitment cannot cover a kilometre-scale area of influence. The three Category-1 municipal wells and the private wells of roughly 6,000 residents sit within a geographic area that the Agency's expert has already identified as exposed.

3. The risk–benefit profile is unfavourable

Having worked as a health economist, I assessed interventions by weighing their benefits against their costs and risks, with particular weight on downside risk that is severe, irreversible, and borne by people who did not choose it. On this record, I can identify no risk–benefit justification for this alignment.

On the cost-and-risk side, the record contains: irreversible residual effects on a protected drinking-water aquifer; accident and spill contamination scenarios that were *never evaluated*, because the Environmental Protection and Emergency Response Plans (PPE/PIE) do not yet exist (*UDA Report, s. 1.3, p. 1-3*); a hydrogeological assessment conducted with no new field campaign, no new testing, and no detailed modelling, a limit UDA expressly recognizes as a source of uncertainty (*UDA Report, s. 1.3, p. 1-3*); and a monitoring plan that municipal insurers have declined to insure, treating the residual drinking-water risk as uninsurable. When professional underwriters — whose entire business is pricing risk — will not write the policy, that is a market signal an economist cannot ignore.

On the benefit side, the benefit is a rail bypass — and a bypass does not require *this* corridor across a protected recharge zone. The benefit is achievable by an alignment that does not put a municipal drinking-water source in irreversible jeopardy. The cost–benefit therefore fails not because the bypass concept lacks value, but because this particular location loads catastrophic, uninsurable, irreversible downside onto thousands of residents for no benefit that a different alignment could not also deliver. That is the textbook definition of an unfavourable risk–benefit profile.

I am aware of the single reassuring line in the summary — that no residual groundwater impact appears, at this stage, « *à la fois irréversible, impossible à atténuer et de nature à compromettre la faisabilité du Projet* » (*UDA Report, s. 8.1, p. 8-2*). I would urge the Agency not to read that sentence as a clean bill of health. It is a *triple cumulative* threshold — simultaneously irreversible

and impossible to mitigate *and* project-defeating — a bar almost nothing ever clears, and a question UDA expressly declined to decide, having disclaimed any view on the project’s overall acceptability (*UDA Report, s. 1.3, p. 1-3*). The sentence that immediately follows is the operative one: the file does *not* « démontre[r] de façon satisfaisante » that the significant effects will be adequately prevented, monitored, mitigated or compensated (*UDA Report, s. 8.1, p. 8-2*). Just because this project is ‘doable’ doesn’t mean it is reasonable.

4. Approving this location on this record would be unreasonable

Section 98 asks whether the proposed location is suitable, having regard to railway requirements and to the interests of the affected localities. A condition can govern how a suitable location is built; it cannot manufacture suitability where the record does not establish it. You cannot condition your way out of an irreversible loss.

A determination that the location is suitable, made on a record where the Agency’s own expert concedes that adequacy is *not demonstrated*, that key effects are irreversible, that the determinative protection plans were never examined, and that accident scenarios were never assessed, would not be a determination that is justified, transparent and intelligible in light of the evidence. By the standard the Supreme Court set in *Vavilov*, a decision that approves despite its own expert’s reservations is, by definition, unreasonable.

5. I do not consent — and what I ask of the Agency

I do not consent — as a resident whose drinking water is at stake, and as a health professional bound to do no harm — to a final determination that would place the water supply of thousands of people at irreversible risk on an admittedly incomplete record. I do not accept being asked to absorb that risk by either the Agency or Transport Canada, while the very expert the Agency retained reports that the file does not satisfactorily demonstrate that these effects will be adequately managed. Consent obtained on an incomplete record is not consent; and risk imposed without it is not mitigation.

I therefore respectfully ask the Agency to do the prudent, narrow and reversible thing: to **suspend any final determination of suitability** until the elements that actually determine the location — first among them the effective protection (not merely the surveillance) of the drinking water, the reconciliation of the project’s zones of influence with the regulatory wellhead-protection areas, the accident and spill scenarios, and the PPE and PIE — have been completed, placed on the record, and subjected to rebuttal. A determination built on a complete record will withstand scrutiny far better than one rendered over the documented reservations of the Agency’s own expert.

That is the course consistent with the law, with sound risk economics, and with the first duty of anyone responsible for the safety of others: first, do no harm.

Respectfully submitted,

Kurt Lucas