

# MOLA HEADLAND INFRASTRUCTURE



TPO42

## CONTEXT SHEET

|                  |                         |                                        |                                                                                                                        |
|------------------|-------------------------|----------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TE45      | SUB AREA<br>Sub area/Trench<br>TPO42 1 | Context number<br>(050900)                                                                                             |
| ECB #            | Subgroup<br>TESTPITS 42 | Parent context                         | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                                                     |
|--|--|----------|--|--|-----------------------------------------------------|
|  |  | (050100) |  |  | Same as context <input checked="" type="checkbox"/> |
|  |  | (050900) |  |  | Cuts context <input checked="" type="checkbox"/>    |
|  |  |          |  |  | Cut by context <input checked="" type="checkbox"/>  |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               | pit <input type="checkbox"/><br>post hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                 |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                      |  | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* |              | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input checked="" type="checkbox"/> loose<br><input type="checkbox"/> friable |   | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |  | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input checked="" type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |  | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Thickness</b><br>0.1m                                                                                                                                                              |   | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| frequency                                                                                                                                                                             | F |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| bulk find                                                                                                                                                                             |   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

### CROSS REFERENCE

|                 |                                         |                      |                                                                                                                            |
|-----------------|-----------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>✓ | Finds nos<br>F55809<br>F55810<br>F55811 | Photo nos<br>0500628 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|-----------------|-----------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☐ use ☐ disuse ☒

Date 21/8/17

Initials DH

Checked by L.B.B.

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Part of the dark earth spread found in Area 1 of TEAS.

Investigated via a 1m x 1m test pit, in accordance with the excavation strategy this context was not sampled.

Some archaeological material was recovered and this consists of Roman pottery and animal bone.

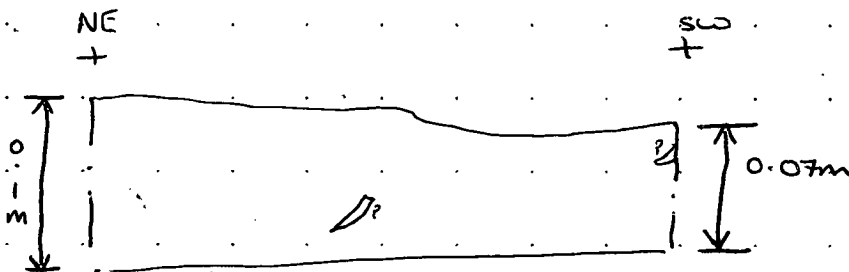
deposit

\* ~~It~~ is shallower toward the east and contains frequent, small, unworked stones from the surrounding, gravelly natural.

Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



# MOLA HEADLAND INFRASTRUCTURE



1P041

|                         |                           |                 |                                                                                                                        |
|-------------------------|---------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEAS</b> | Sub-area/Trench | Context number<br><b>(050901)</b>                                                                                      |
| ECB #                   | Subgroup                  | Parent context  | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |  |  |  |                 |
|--|--|--|--|--|-----------------|
|  |  |  |  |  | Same as context |
|  |  |  |  |  |                 |
|  |  |  |  |  |                 |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE                                                                                                                               | <b>Sides</b><br>[ <input type="checkbox"/> vertical<br>[ <input type="checkbox"/> steep<br>[ <input type="checkbox"/> moderate<br>[ <input type="checkbox"/> gentle<br>[ <input type="checkbox"/> stepped<br>[ <input type="checkbox"/> undercutting<br>[ <input type="checkbox"/> complex* | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>U <input type="checkbox"/> uneven<br>X <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|----------------|-----------|--------------|----------------|------|------------------|-------|----------------|------------------|-------|----------------|------------------|---------|--------------|------------------|---------|--------------|-----------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-----------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                               | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat<br>other* <input type="checkbox"/> | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input checked="" type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Thickness</b>                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                | <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CIP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>bulk find</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | stones*   | chalk    | iron pan       | manganese | charcoal     | plant remains* | wood | marine shell     | bone* | pot            | fired clay / CBM | CIP   | mortar/plaster | leather/textile  | glass   | metal        | industrial waste | lithics | coarse stone | frequency |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | bulk find |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| stones*                                                                                                                                                                               | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | iron pan                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | manganese | charcoal | plant remains* | wood      | marine shell | bone*          | pot  | fired clay / CBM | CIP   | mortar/plaster | leather/textile  | glass | metal          | industrial waste | lithics | coarse stone |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| frequency                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| bulk find                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

## CROSS REFERENCE

|                             |                                                                       |                             |                                                                                                                            |
|-----------------------------|-----------------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S05091</b> | Finds nos<br><b>\$F 55629</b><br><b>\$F 55630</b><br><b>\$F 55631</b> | Photo nos<br><b>0500639</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|-----------------------------|-----------------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>22/8/17</b>                                                                                           |
| Initials <b>RBC</b>                                                                                           |
| Checked by <b>L.B.B.</b>                                                                                      |

This form is incomplete if fields marked with \* are empty; PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Occupation Layer (050901) Found in The Test Pit 041.  
~~moderately~~ moderately compacted, with a colour grey brownish and a composition based in clay and silt.

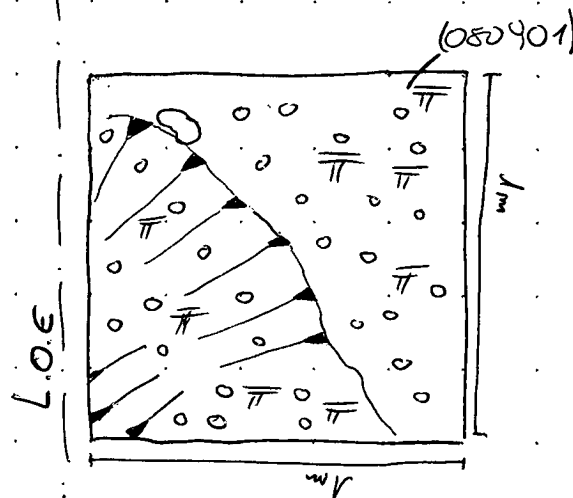
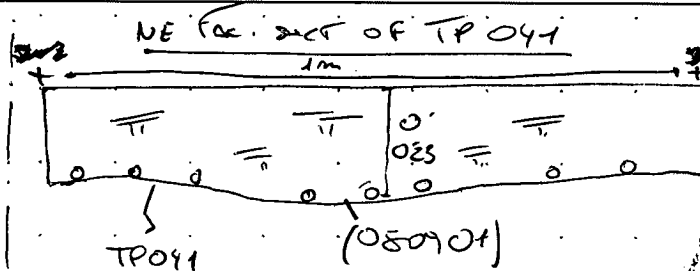
The Finds of (050901) are composed of occasional charcoal, moderate pottery (probably Roman), occasional animal bones and probably 3 nails of metal (SF 55624 → E31).

The method of excavation was based on ~~the method of excavation~~  
~~the method of excavation~~ the method of excavation was based on the method of excavation  
 sent samples of soil to sieve and

Refer to context

(consider: location plan, detailed plan showing relationships, section showing fills/deposits (if appropriate))

NTS  
 TP.041  
 (050901)



key  
 ○ Stone  
 || Clay



IP 088

MOLA HEADLAND  
INFRASTRUCTURE

## CONTEXT SHEET

|                  |                     |                            |                                                                                                                        |
|------------------|---------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA 5 | Sub-area/Trench<br>1       | Context number<br>(050902)                                                                                             |
| ECB #            | Subgroup            | Parent context<br>(050902) | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | 050100   |  |  | Same as context |
|  |  | (050902) |  |  | Cuts context    |
|  |  |          |  |  | Cut by context  |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |               |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>▲                                                                                                                     |               | <b>Sides</b><br>] <input type="checkbox"/> vertical<br>\ <input type="checkbox"/> steep<br>\ <input type="checkbox"/> moderate sloping<br>\ <input type="checkbox"/> gentle<br>\ <input type="checkbox"/> stepped<br>\ <input type="checkbox"/> undercutting<br>\ <input type="checkbox"/> complex* |              | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>\ <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                                        | <b>Depth</b> | <b>Diameter</b>                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |               |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                          | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>.. dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b><br>0.10m                                                                                                                                                             |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                             | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                      | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | plant remains*           | wood                     | marine shell             | bone*                               | pot                                 | fired clay / CBM                    | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## CROSS REFERENCE

|            |           |           |                                                                                                             |
|------------|-----------|-----------|-------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos | Drawing nos                                                                                                 |
|            |           | 0506627   | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |

## Basic process

construction ☐ use ☐ disuse ☒

Date 21/08/17

Initials AC

Checked by L. B. A.

This form is incomplete if fields marked with \* are empty. PIO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

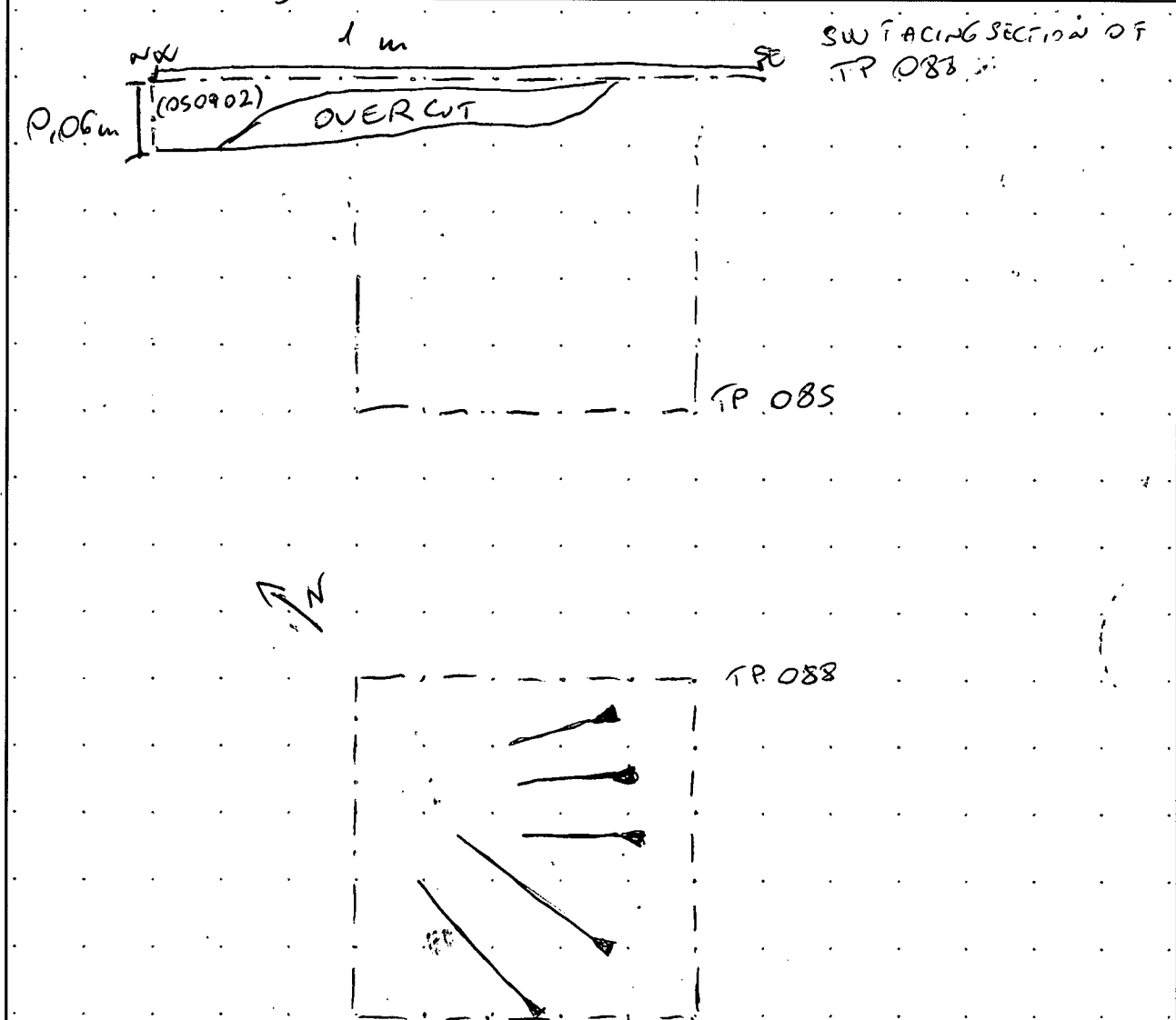
(any further details that may be important for understanding the context, including items marked \* overleaf)

THE DEPOSIT IS ~~SHALLOW~~ THE SAME THAT COVERS THE AREA OF THE SUPPOSED "VILLA". IN THIS SLOT THE DEPOSIT WAS VERY SHALLOW (THAT'S WHY IN THE SW FACING SECTION WAS OVERCUT BY PLATON). SOME POT IN IT (300IES, ROMAN AGE(?)) AND 2 FRAGMENTS OF BONE, 2 SMALL PIECES OF C.B.M.  
THE FINDS IN THIS SLOT ARE ~~VERY~~ FRAGMENTED AND SMALL (INTENSE AGRICULTURAL ACTIVITY(?)).

Refer to context

NTS

SKETCHES  
(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



|                         |                            |                             |                                                                                                                                   |
|-------------------------|----------------------------|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>(050903)</b>                                                                                                 |
| ECB #<br><b>-</b>       | Subgroup<br><b>-</b>       | Parent context<br><b>-</b>  | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (050002) |  |  | Same as context | — |
|  |  | (050903) |  |  | Cuts context    | — |
|  |  |          |  |  | Cut by context  | — |

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                 |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input checked="" type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br>N<br>                              | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                 | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                 |

### INTERPRETATION

[illegible]

### Basic process

|            |                              |           |                                                                                                                  |                                                                                                                                                                                           |
|------------|------------------------------|-----------|------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos                    | Photo nos | Drawing nos                                                                                                      | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/><br>Date <u>21/08/17</u><br>Initials <u>P.T.</u><br>Checked by <u>2.B.B.</u> |
| S05088     | F506903<br>F507161<br>F55781 | 0500631   | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/><br>— |                                                                                                                                                                                           |

47 This form is incomplete if fields marked with ▽ are empty. PTO for additional information (and describing all items marked with \*) and sketches.

F55647

755782

F 557 83

# ADDITIONAL INFORMATION

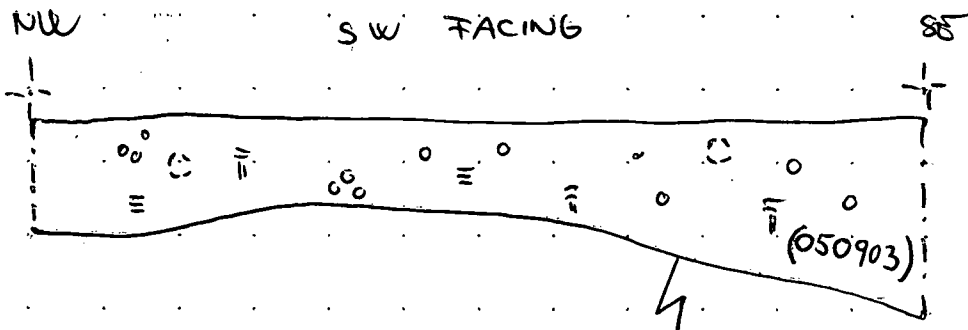
(any further details that may be important for understanding the context, including items marked \* overleaf)

(050903) IS A DARK / MID-DARK BROWN COLOURED DEPOSITION WHICH IS GRAVELLY IN PLACES. IT HAD BEEN EXCAVATED IN TWO SPITS WHERE POTTERY FRAGMENTS, ANIMAL BONE FRAGMENTS AND CBM HAVE BEEN RECOVERED. IN SPIT 1 A NAIL AND A NAIL'S HEAD HAVE BEEN FOUND. THIS IS POSSIBLY A ROMAN OCCUPATIONAL LAYER BASED ON THE FINDS RECOVERED.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



KEY: ○ - GRAVEL  
 ≡ - CLAY  
 ≡ - SILT  
 (○) - CHALK

|                         |                             |                                         |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 05</b> | Sub-area/ <del>French</del><br><b>1</b> | Context number<br><b>(050904)</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context                          | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (050002) |  |  | Same as context |
|  |  | (050904) |  |  | Cuts context    |
|  |  |          |  |  | Cut by context  |

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
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| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE | <b>Sides</b><br> <input type="checkbox"/> vertical<br> <input type="checkbox"/> steep<br> <input type="checkbox"/> moderate<br> <input type="checkbox"/> gentle<br> <input type="checkbox"/> stepped<br> <input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br> <input type="checkbox"/> flat<br> <input type="checkbox"/> concave<br> <input type="checkbox"/> v-shaped<br> <input type="checkbox"/> sloping<br> <input type="checkbox"/> uneven<br><input type="checkbox"/> complex* | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>Diameter</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### INTERPRETATION

[illegible]

Basic process

|                      |                                         |                                 |                                                                                                                            |                                                                                                                                                                                    |
|----------------------|-----------------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>505090 | Finds nos<br>F55781<br>F55647<br>F55782 | Photo nos<br>0500632<br>0500633 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disease <input checked="" type="checkbox"/><br>Date 22/08/17<br>Initials RSR<br>Checked by, J. B. B. |
|----------------------|-----------------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

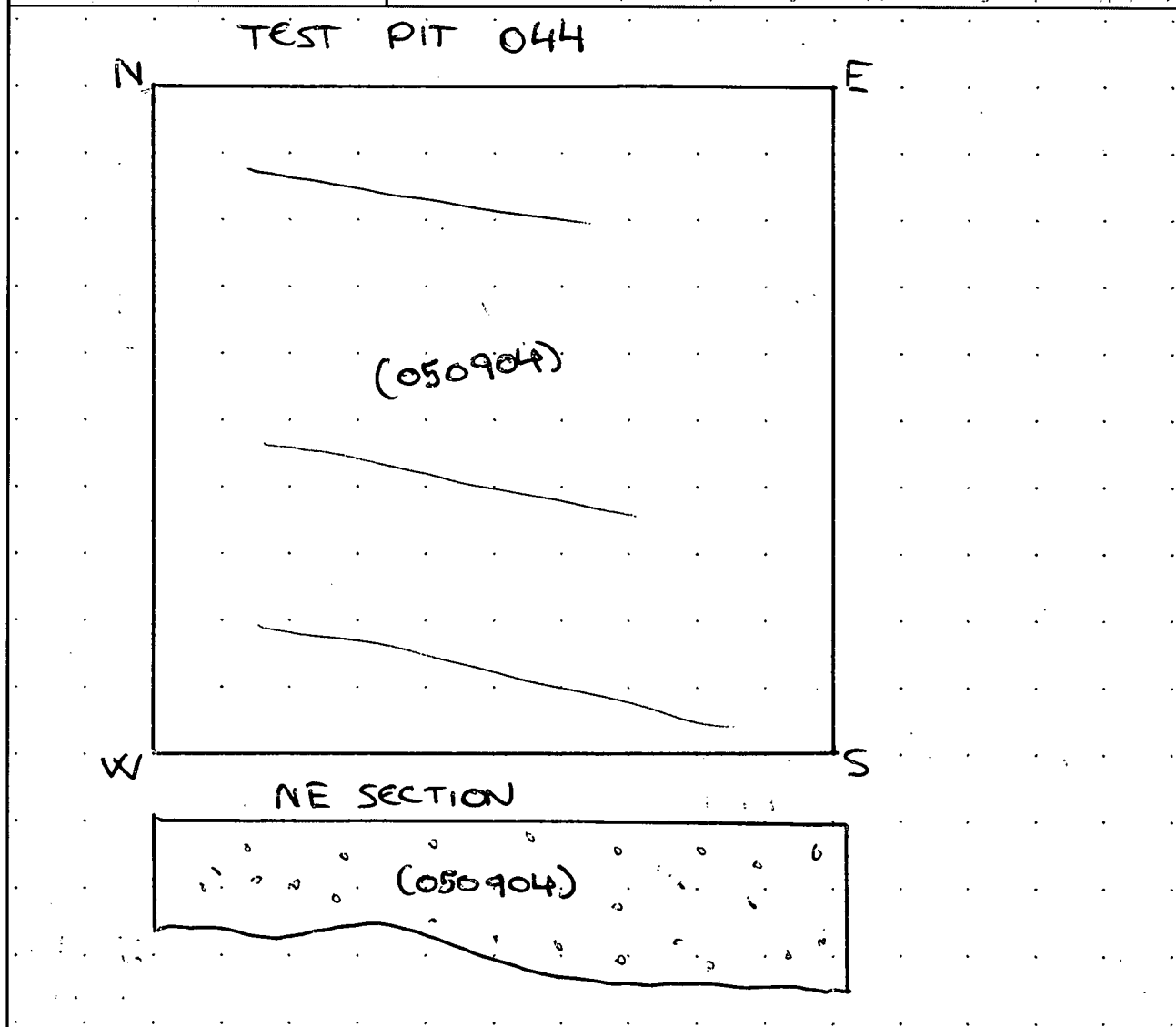
Deposit (050904) so-called "Dark Earth", where three splits have been distinguished. In general terms, we think this layer seems to be an abandonment layer, probably razed during Anglosaxon times due to the fact that some pieces of Anglosaxon potts have been found mixed with Roman & late Antiquity potteries.

Regarding the inclusions, as we mentioned in the other side, charcoal, chalk and small stones have been documented as well as a lot of fragment of CBM, including "Opus Signinum" a type of hydraulic mortar, which basically <sup>suggests</sup> ~~indicates~~ that in the area should have had this kind of construction. Therefore the hypothesis of the "Roman Villa" and its abandoned-razed during Anglosaxon times can be argued in order to continue digging and researching whole the area.

Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



T.P 048

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEAS</b> | Sub-area/Trench<br><b>1</b>       | Context number<br><b>(050905)</b>                                                                                      |
| ECB #                   | Subgroup                  | Parent context<br><b>(050905)</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>050900</b>   |  |  | Same as context |
|  |  | <b>(050905)</b> |  |  | Cuts context    |
|  |  |                 |  |  | Cut by context  |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                      | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input type="checkbox"/> steep<br>L <input type="checkbox"/> moderate<br>L <input type="checkbox"/> gentle<br>L <input type="checkbox"/> stepped<br>L <input type="checkbox"/> undercutting<br>L <input type="checkbox"/> complex* | <b>Base</b><br>— <input type="checkbox"/> flat<br>— <input type="checkbox"/> concave<br>— <input type="checkbox"/> v-shaped<br>— <input type="checkbox"/> sloping<br>— <input type="checkbox"/> uneven<br>— <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |   |  |   |  |  |  |   |   |   |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------|------------------|---------|--------------|-----------|---|---|--|---|--|--|--|---|---|---|--|--|--|--|--|--|--|--|-----------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> <input type="checkbox"/> clay<br>silty <input type="checkbox"/> <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input checked="" type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |   |  |   |  |  |  |   |   |   |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b><br><b>0.25</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |   |  |   |  |  |  |   |   |   |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |   |  |   |  |  |  |   |   |   |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td>F</td> <td>O</td> <td></td> <td>O</td> <td></td> <td></td> <td></td> <td>M</td> <td>M</td> <td>O</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>bulk find</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | stones*                  | chalk                    | iron pan                 | manganese                | charcoal                            | plant remains*                      | wood                                | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal        | industrial waste | lithics | coarse stone | frequency | F | O |  | O |  |  |  | M | M | O |  |  |  |  |  |  |  |  | bulk find | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | manganese                | charcoal                 | plant remains*           | wood                     | marine shell                        | bone*                               | pot                                 | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone |                  |         |              |           |   |   |  |   |  |  |  |   |   |   |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | F                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | O                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | O                        |                          |                          |                          | M                                   | M                                   | O                                   |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |   |  |   |  |  |  |   |   |   |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |              |                  |         |              |           |   |   |  |   |  |  |  |   |   |   |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |

### CROSS REFERENCE

|                |                                   |                                 |                                                                                                                            |
|----------------|-----------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br> | Finds nos<br><br>F55820<br>F55821 | Photo nos<br>0500637<br>0500638 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|----------------|-----------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☐ use ☐ disuse ☒

|            |                 |
|------------|-----------------|
| Date       | <b>22/08/17</b> |
| Initials   | <b>Ac</b>       |
| Checked by | <b>J. B. B.</b> |

This form is incomplete if fields marked with \* are empty. PYO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf!)

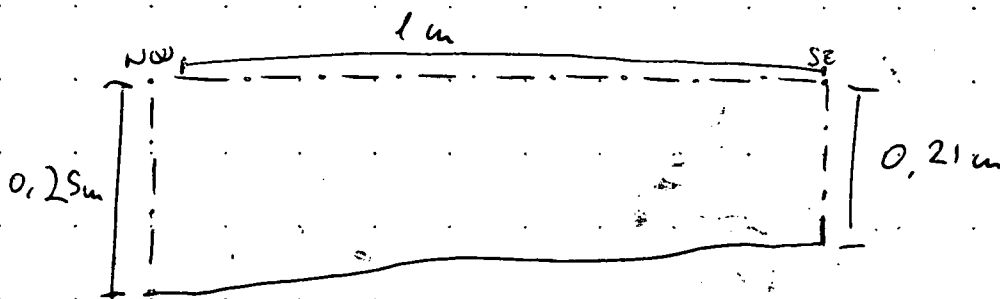
THE DEPOSIT IS ~~THE~~ PART OF THE DARK SPREAD THAT COVERS THE SUPPOSED "VILLA". IT'S ~~A~~ A DARK GREY CLAYEY SILT BASE WITH FREQUENT PRESENCE OF FRAGMENTS OF NATURAL FLINT. ~~FRAGMENTS~~ FINDS IN THIS SLOT ARE MODERATE, MOSTLY ROMAN POT. IN THE FIRST SPIT A PIECE OF ROMAN DECORATED POT, IN THE ~~SECOND~~ <sup>THIRD</sup> A VERY FINE POT-SHERD OF SAMIAN (IN THE INTERFACE BETWEEN THE TWO LAYERS)\* <sup>HIGH QUALITY</sup> AS ALWAYS FOR THIS DEPOSIT FINDS ARE ~~IN~~ SMALL FRAGMENTS AND SOMETIMES VERY WORN IT MEANS THAT THEY HAVE BEEN EXPOSED FOR A LONG TIME AND THE DEPOSIT WAS INTERESTED BY AGRICULTURAL ACTIVITY.

\* IN SPIT 1 A NICE POT-SHERD OF A ROMAN MORTAR ~~WAS~~ THE LAYER UNDERNEATH IS <sup>DARK BROWN</sup> A DEPOSIT, MORE SANDY WITH FREQUENT CHARCOAL AND FREQUENT PRESENCE OF FRAGMENT OF NATURAL FLINT.

Refer to context: NTS

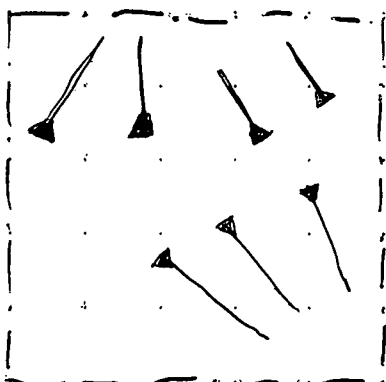
SKETCHES  
(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

SW FACING SECTION  
OF TP. 048



TP 043

TP 048







## CONTEXT SHEET

|                   |                     |                         |                                                                                                                        |
|-------------------|---------------------|-------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A 14 | Area/Field<br>TEA 5 | Sub-area/Trench<br>P. 1 | Context number<br>(050906)                                                                                             |
| ECB #             | Subgroup            | Parent context          | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |           |  |                 |   |
|--|--|----------|-----------|--|-----------------|---|
|  |  | (050100) | - ALLUWUM |  | Same as context | ✓ |
|  |  | (050906) |           |  | Cuts context    | ✓ |
|  |  |          |           |  | Cut by context  | ✓ |

CUT

(if you are using this section score out section **FILL/DEPOSIT** below)

## DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |  |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                                                                                                       |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |  |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                 | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      |  |
| <b>Diameter</b>                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |  |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |  |

**FILL/DEPOSIT**

(if you are using this section score out section **CUT** above)

## DESCRIPTION

### INTERPRETATION

[illegible]

### CROSS REFERENCE

|                      |                                                                  |                      |                                                                                                                            |
|----------------------|------------------------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>505094 | Finds nos<br>F506004<br>F506005<br>F506007<br>F506009<br>F506010 | Photo nos<br>0500641 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|----------------------|------------------------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|

Basic process

construction ☐ use ☒ disuse ☐

Date 23/08/11

Initials E.D.

Checked by J.B.B.

550607 This form is incomplete if fields marked with ▼ are empty. PTO for additional information (and describing all items marked with \*) and sketches.

F506011  
F506012  
F506013  
F506014

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Dark greyish brown silty clay deposit, occupational layer.

TEST PIT 045, excavated in 3 SPLITS (1 split every 10 cm).

Inclusions: frequent presence of flints and flintstones of small and medium size (<10 mm & <30 mm); occasional chalk flakes of small size; occasional charcoal; very occasional marine shell.

FINDS: SPLIT 1: Small fragments of animal bones and teeth; very occasional CBM; frequent pot: Iron Age <sup>(?)</sup> and Roman <sup>+ Saxae (?)</sup>, few sherds with black paint; small finds: F506004: Fe nail head; F506005: A part of pin (?).

FINDS: SPLIT 2: Small & medium fragments of animal bones and teeth, 1 is burnt; Pot frequent: Iron Age/Saxae (?) and Roman, a complete round base, red slipped; black and red slip on some sherds; 1 CBM; small finds: F506007: Fe object; F506010: Fe object (brooch?); F506009, F506010, F506012, F506013, F506014: Fe Nails.

FINDS SPLIT 3: Small & medium fragments of animal bones, some vertebral pieces; frequent pot: Roman and Iron Age/Saxae?, some sherds red or black slipped.

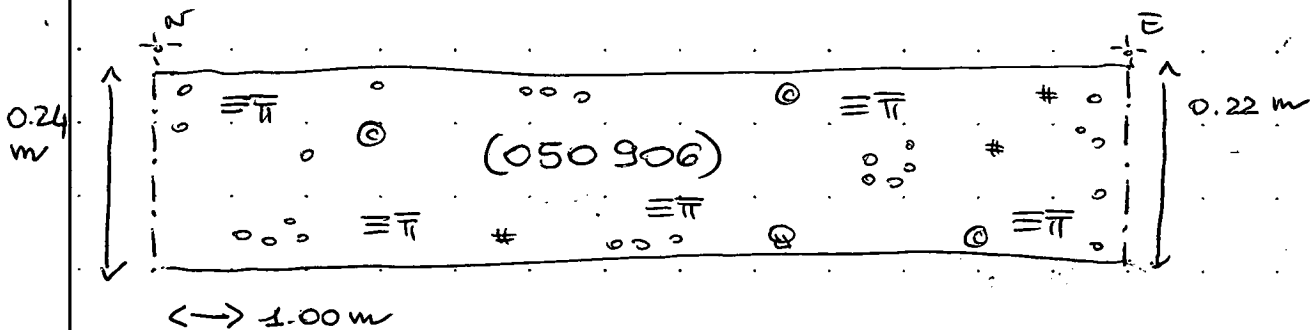
Refer to context

SKETCHES

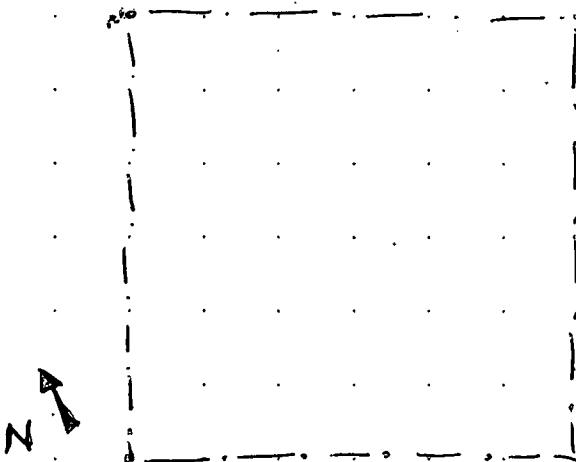
(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

Section N.T.S.  
SW facing

KEY:  $\equiv$  CLAY # CHARCOAL 8% GRAVEL/STONES  
 $\equiv$  SILT @ CHALK @ SHELL



Plan N.T.S.



# MOLA HEADLAND INFRASTRUCTURE



TEST P.I.T 049

## CONTEXT SHEET

|                         |                            |                             |                                                                                                             |
|-------------------------|----------------------------|-----------------------------|-------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>050907</b>                                                                             |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>       | Parent context<br><b>—</b>  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                          |
|--|--|---------------|--|--|--------------------------|
|  |  | <b>050007</b> |  |  | Same as context <b>—</b> |
|  |  | <b>050907</b> |  |  | Cuts context <b>—</b>    |
|  |  |               |  |  | Cut by context <b>—</b>  |

### CUT

(if you are using this section score out section **FILL/DEPOSIT** below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                 |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          |  | <b>Sides</b><br>] <input type="checkbox"/> vertical<br>\ <input type="checkbox"/> steep<br>/ <input type="checkbox"/> moderate sloping<br>~ <input type="checkbox"/> gentle<br>~ <input type="checkbox"/> stepped<br>Z <input type="checkbox"/> undercutting<br>~ <input type="checkbox"/> complex* |              | <b>Base</b><br>— <input type="checkbox"/> flat<br>\ <input type="checkbox"/> concave<br>/ <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>~ <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of (tick all that apply)</b><br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

### FILL/DEPOSIT

(if you are using this section score out section **CUT** above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------|--------------|-------|-----|------------------|-----|----------------|-----------------|-------|-------|------------------|---------|--------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input checked="" type="checkbox"/> friable |         | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |          | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |          | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Thickness</b><br><b>0.19m</b>                                                                                                                                                                 |         | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                           |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| frequency                                                                                                                                                                                        | stones* | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan | manganese                                                                                                                                                                                                                                                                                                                                                                      | charcoal |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | plant remains* | wood | marine shell | bone* | pot | fired clay / CBM | CTP | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone |
| bulk find                                                                                                                                                                                        |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |

### CROSS REFERENCE

|                             |                       |                             |                                                                                                                            |
|-----------------------------|-----------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>505087</b> | Finds nos<br><b>—</b> | Photo nos<br><b>0500660</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|-----------------------------|-----------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☐ use ☐ disuse ☒

Date **25/8/17**

Initials **BC**

Checked by **L. B. A.**

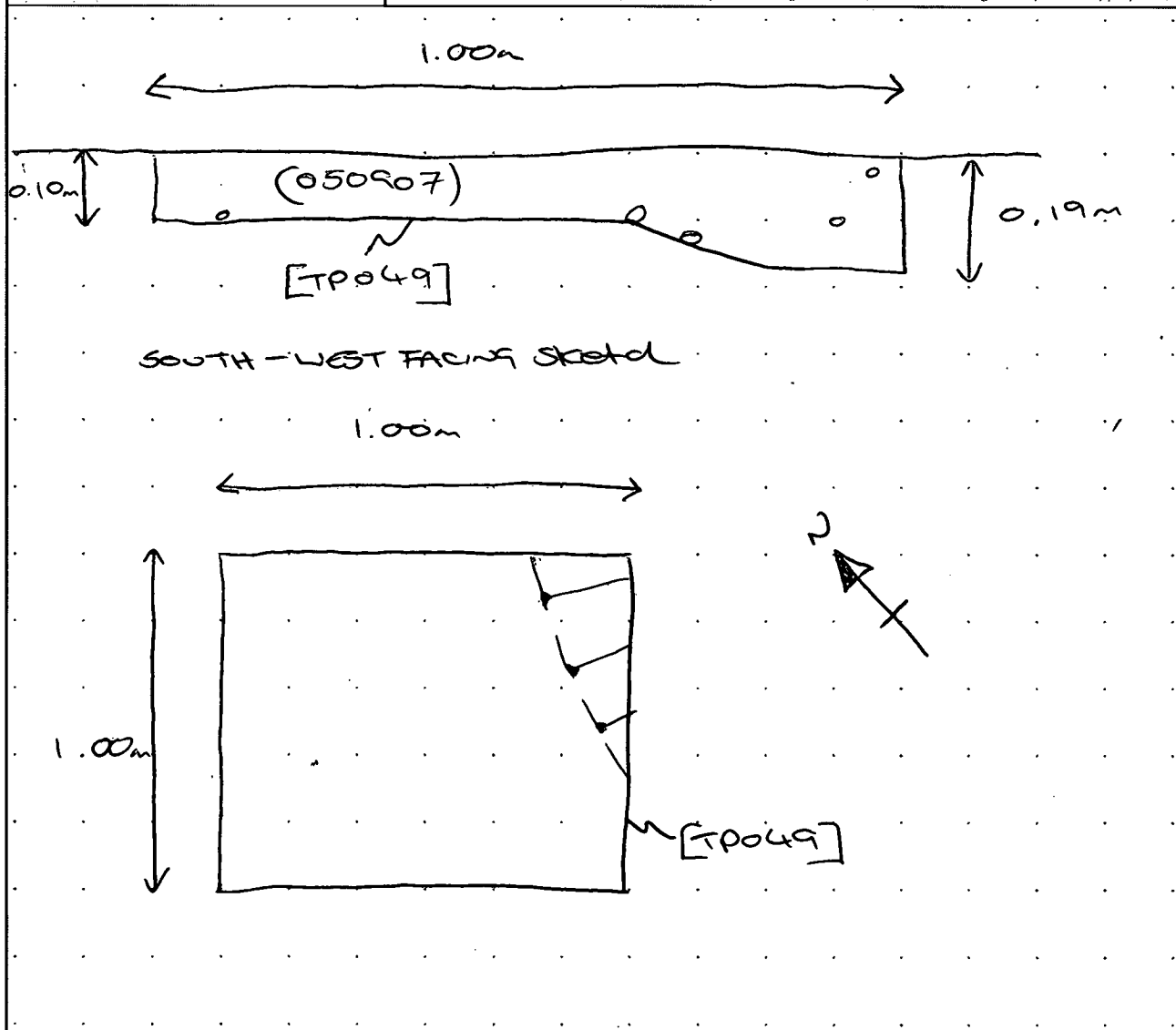
This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

1m x 1m TEST PIT 049 THROUGH OCCUPATION  
LAYER CONTAINING DEPOSIT (050907)  
DEPOSIT INCLUDED MOD. SMALL angular stones,  
occ charcoal pieces, occ POTTERY FRAGS,  
occ CBM FRAGS & occ A. BONE FRAGS.  
DEPOSIT SHOWN TO INCREASE IN DEPTH  
TOWARDS

Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



T.P. 50

MOLA HEADLAND  
INFRASTRUCTURE

## CONTEXT SHEET

|                         |                             |                 |                                                                                                                        |
|-------------------------|-----------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 05</b> | Sub-area/Trench | Context number<br><b>(050908)</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(050902)</b> |  |  | Same as context |
|  |  | <b>(050908)</b> |  |  | Cuts context    |
|  |  |                 |  |  | Cut by context  |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                             |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                             |              |                 | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>✓ <input type="checkbox"/> NE-SW<br>✓ <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                      | <b>Sides</b><br>} <input type="checkbox"/> vertical<br>} <input type="checkbox"/> steep<br>} <input type="checkbox"/> moderate<br>} <input type="checkbox"/> gentle<br>} <input type="checkbox"/> stepped<br>} <input type="checkbox"/> undercutting<br>} <input type="checkbox"/> complex*<br>sloping | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                          | <b>Width</b>                                                                                                                                                                                                                                | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                             |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |              |                  |         |              |           |   |  |  |   |  |  |   |   |   |  |  |  |  |  |   |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------|------------------|---------|--------------|-----------|---|--|--|---|--|--|---|---|---|--|--|--|--|--|---|--|--|--|-----------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input checked="" type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input checked="" type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br>other fill/deposit (describe below) <input checked="" type="checkbox"/> |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |              |                  |         |              |           |   |  |  |   |  |  |   |   |   |  |  |  |  |  |   |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| <b>Thickness</b><br><b>0'66</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | black <input checked="" type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | other* <input type="checkbox"/>                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |              |                  |         |              |           |   |  |  |   |  |  |   |   |   |  |  |  |  |  |   |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent<br><table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td>O</td> <td></td> <td></td> <td>M</td> <td></td> <td></td> <td>O</td> <td>M</td> <td>M</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>O</td> <td></td> <td></td> <td></td> </tr> <tr> <td>bulk find</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | stones*                  | chalk                    | iron pan                 | manganese                | charcoal                            | plant remains*                      | wood                                | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                                 | mortar/plaster           | leather/textile          | glass                    | metal        | industrial waste | lithics | coarse stone | frequency | O |  |  | M |  |  | O | M | M |  |  |  |  |  | O |  |  |  | bulk find | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | iron pan                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | manganese                | charcoal                 | plant remains*           | wood                     | marine shell                        | bone*                               | pot                                 | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                               | metal                    | industrial waste         | lithics                  | coarse stone |                  |         |              |           |   |  |  |   |  |  |   |   |   |  |  |  |  |  |   |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| frequency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | M                        |                          |                          | O                        | M                                   | M                                   |                                     |                          |                          |                          |                          | O                                   |                          |                          |                          |              |                  |         |              |           |   |  |  |   |  |  |   |   |   |  |  |  |  |  |   |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/>                                                                                                                                                                                                                                                   | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |              |                  |         |              |           |   |  |  |   |  |  |   |   |   |  |  |  |  |  |   |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| Drag layer, Aband layer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |              |                  |         |              |           |   |  |  |   |  |  |   |   |   |  |  |  |  |  |   |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |

## CROSS REFERENCE

|                             |                                                                 |                                               |                                                                                                                            |
|-----------------------------|-----------------------------------------------------------------|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S05097</b> | Finds nos<br><b>(F506016)</b><br><b>F55877</b><br><b>F55878</b> | Photo nos<br><b>0500655</b><br><b>0500656</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|-----------------------------|-----------------------------------------------------------------|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

## Basic process

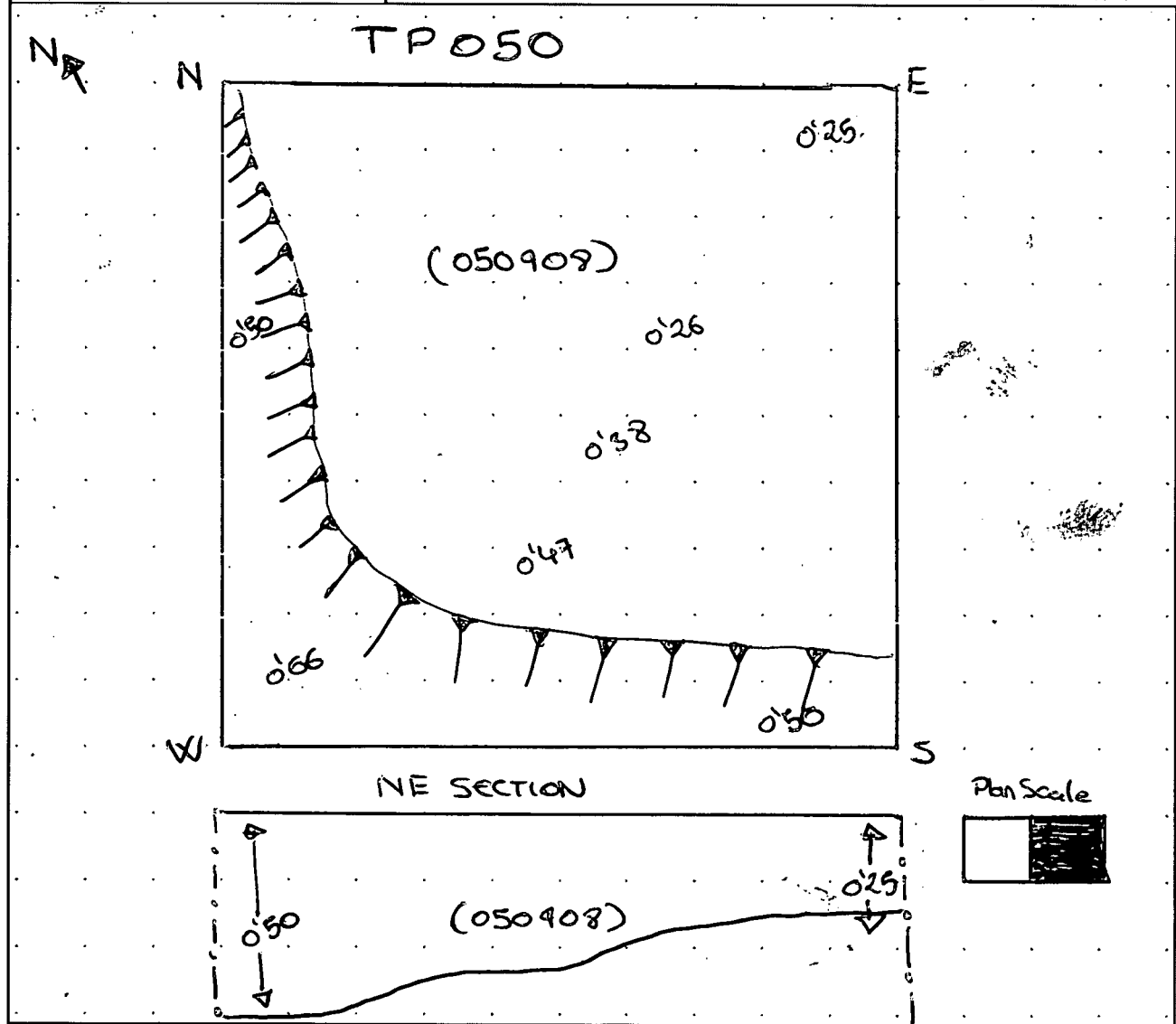
construction ☐ use ☐ disuse ☒Date **24/08/17**Initials **RSR**Checked by **L.B.B.**sieve  
finds

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

Deposit (050908) so-called "Dark Earth", which basically presents a silty-clay matrix; regarding its inclusions, some charcoal evidences in a high percentage have been documented as well as small stones (low) and marine-shell (probably fossil root). Likewise, regarding the finds, the majority of potteries could be dated in late Roman - (late Antiquity Times) but we've found also an important percentage (30% more or less) of common pottery with a long-term-life use, therefore we cannot say that this deposit should have been formed during this time. According to the documentation - information we're using (see general archive, ie Macphail et al., 2003; also see Carver, 1987 or more recently Clarke, 2017), this type of "Dark Earth" soil deposit are frequent during the late Roman Period due to several reasons (abandonment layers, drag layers...) but also could presents evidences of post-Roman times (intrusions, destruction-braced-raised-layers) explaining its complexity, lack of homogeneity (clay, silt...) or the reductionism of considering - interpreting it as a "watertight compartment" as a Pompeii deposit (the classic mistake of Pompeii premise).

Refer to context

SKETCHES  
(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



|                  |                     |                      |                                                                                                                        |
|------------------|---------------------|----------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA 5 | Sub-area/Trench<br>1 | Context number<br>(050909)                                                                                             |
| ECB #<br>-       | Subgroup<br>-       | Parent context<br>-  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (050002) |  |  | Same as context | — |
|  |  | (050909) |  |  | Cuts context    | — |
|  |  |          |  |  | Cut by context  | — |

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">  <input type="checkbox"/> vertical<br/>  <input type="checkbox"/> steep<br/>  <input type="checkbox"/> moderate<br/>  <input type="checkbox"/> gentle<br/>  <input type="checkbox"/> stepped<br/>  <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div>           sloping         </div> </div> | <b>Base</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">  <input type="checkbox"/> flat<br/>  <input type="checkbox"/> concave<br/>  <input type="checkbox"/> v-shaped<br/>  <input type="checkbox"/> sloping<br/>  <input type="checkbox"/> uneven<br/> <input type="checkbox"/> complex*         </div> </div> |              |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Width</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Depth</b> | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                 |

### INTERPRETATION

[illegible]

### Basic process

|                 |                                                   |                                 |                  |                                                                                                                                                                       |
|-----------------|---------------------------------------------------|---------------------------------|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>— | Finds nos<br>F55648<br>F55784<br>F55785<br>F55786 | Photo nos<br>0500643<br>0500642 | Drawing nos<br>— | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/><br>Date 22/08/17<br>Initials Pr.<br>Checked by L. B. B. |
|-----------------|---------------------------------------------------|---------------------------------|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|

# ADDITIONAL INFORMATION

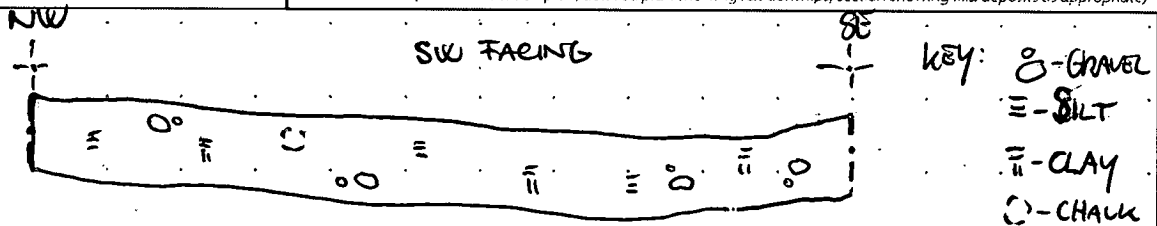
(any further details that may be important for understanding the context, including items marked \* overleaf)

(050909) IS A DARK / MID-DARK BROWN FILL OF AN OCCUPATION LAYER. AT ITS NORTH-EAST SECTION IT IS SHALLOWER THAN AT THE OPPOSITE SITE, AROUND 10 CM DIFFERENCE IS VISIBLE. IT HAD BEEN EXCAVATED IN TWO SPITS, WHERE SPIT 1 BROUGHT POT FRAGMENTS, ANIMAL BONES AND CBM MORE FREQUENTLY THAN SPIT 2. THE DIFFERENCE BETWEEN THE DEPOSIT BELOW AND (050909) IS DIFFICULT TO OBSERVE, ONLY THAT IS MORE GRAVELLY THAN (050909). BY THE LOOK OF THE FINDS WE CAN PRESUME THAT IT IS A ROMAN OCCUPATION LAYER.

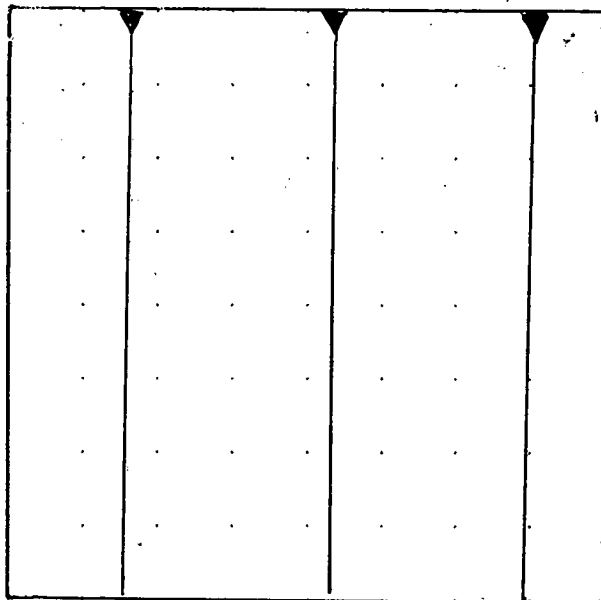
Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



(050909)





*This form is incomplete if fields marked with ▼ are empty. PTO for additional information (and describing all items marked with \*) and sketches.*

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overlaid)

DARK BROWNISH GREY DEPOSIT, EXCAVATED AS PART OF TEST PIT 053.  
DEPOSIT WAS EXCAVATED IN SPITS (LEVELS) OF 0.10M UNTIL THE NEXT ~~BY~~ FILL/DEPOSIT WAS ENCOUNTERED. THE LATTER HAS NOT BEEN EXCAVATED NOR RECORDED.

SPIT 1 PROVIDED VERY LARGE NUMBER OF POTsherds, ROMAN IN ORIGIN BUT ~~OF~~ OF VARIOUS TYPES. SOME BONE FRAGMENTS WERE ALSO RETRIEVED.

SPIT 2 PRODUCED BONE AND POT, BUT IN SMALLER NUMBERS.

OTHER INCLUSIONS INCLUDE VERY SPORADIC CHARCOAL BITS AND VARIOUS GRAVEL STONES. SOME VERY TINY CHALK STONES HAVE ALSO BEEN FOUND.

## DEPOSIT

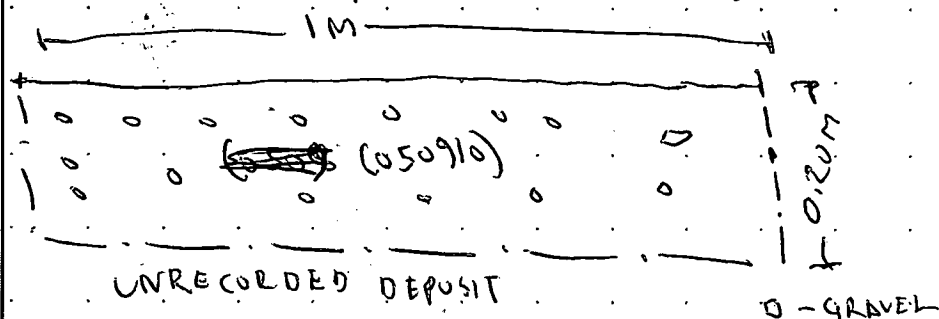
~~IT~~ IS VERY EVENLY SPREAD ON TOP OF ANOTHER FILL/DEPOSIT. THIS ONE IS LIGHTER IN COLOUR AND INCLUDES LARGER NUMBER OF (GRAVEL AND CHALK) STONES AND A HIGHER CONCENTRATION OF CHARCOAL (WHICH IS STILL VERY SPORADIC AND AROUND THE SIZE OF 20P COIN).

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

SOUTH - WEST FACING SECTION OF TEST PIT 053:



# MOLA HEADLAND INFRASTRUCTURE



TP 031

## CONTEXT SHEET

|                         |                            |                                   |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>1</b>       | Context number<br><b>(050911)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>(050911)</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                                                     |
|--|--|-----------------|--|--|-----------------------------------------------------|
|  |  | <b>(050002)</b> |  |  | Same as context <input checked="" type="checkbox"/> |
|  |  | <b>(050911)</b> |  |  | Cuts context <input checked="" type="checkbox"/>    |
|  |  |                 |  |  | Cut by context <input checked="" type="checkbox"/>  |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input type="checkbox"/> steep<br>L <input type="checkbox"/> moderate sloping<br>L <input type="checkbox"/> gentle<br>L <input type="checkbox"/> stepped<br>L <input type="checkbox"/> undercutting<br>L <input type="checkbox"/> complex* | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>S <input type="checkbox"/> sloping<br>U <input type="checkbox"/> uneven<br>C <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |   |  |   |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------|------------------|---------|--------------|-----------|---|---|--|---|--|--|--|---|---|--|--|--|--|--|--|--|--|--|-----------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input checked="" type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input checked="" type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |   |  |   |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b><br><b>0.16</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | other* <input type="checkbox"/>                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |   |  |   |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |   |  |   |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CIP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td>H</td> <td>O</td> <td></td> <td>O</td> <td></td> <td></td> <td></td> <td>O</td> <td>O</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>bulk find</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | stones*                  | chalk                    | iron pan                 | manganese                | charcoal                            | plant remains*                      | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CIP                      | mortar/plaster           | leather/textile          | glass                    | metal        | industrial waste | lithics | coarse stone | frequency | H | O |  | O |  |  |  | O | O |  |  |  |  |  |  |  |  |  | bulk find | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | iron pan                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | manganese                | charcoal                 | plant remains*           | wood                     | marine shell                        | bone*                               | pot                      | fired clay / CBM         | CIP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone |                  |         |              |           |   |   |  |   |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | H                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | O                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | O                        |                          |                          |                          | O                                   | O                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |   |  |   |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/>                                                                                                                                                                                                                                        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |              |                  |         |              |           |   |   |  |   |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |   |  |   |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |

### CROSS REFERENCE

|                             |                                             |                             |                                                                                                                            |
|-----------------------------|---------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>505093</b> | Finds nos<br><b>F55874</b><br><b>F55885</b> | Photo nos<br><b>0500645</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|-----------------------------|---------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>22-8-17</b>                                                                                           |
| Initials <b>SMG</b>                                                                                           |
| Checked by <b>L. B. A.</b>                                                                                    |

This form is incomplete if fields marked with \* are empty: PTO for additional information (and describing all items marked with \*) and sketches.

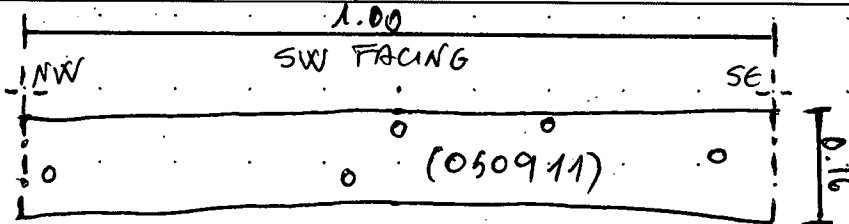
# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

THIS context (050911) is a deposit mid grey clay, with a little brownish and small orange staining. In this deposit silex stones appear, also a few chalk. The pottery are mixed and very round and eroded, likely Roman and Saxon Age. It is possible that this deposit ~~is~~ is alluvial layer.

\* Refer to context

SKETCHES  
(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



SCALE 1:10

## MATRIX

(050001) TOPSOIL

(050002) SUBSOIL

(050911) DEPOSIT

|                         |                           |                             |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>050912</b>                                                                                        |
| ECB #<br><b>—</b>       | Subgroup                  | Parent context              | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |                                                                                   |  |  |                   |
|--|--|-----------------------------------------------------------------------------------|--|--|-------------------|
|  |  | 050002                                                                            |  |  | Same as context — |
|  |  | 050912                                                                            |  |  | Cuts context —    |
|  |  |  |  |  | Cut by context —  |

(if you are using this section score out section **FILL/DEPOSIT** below)

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE | <b>Sides</b><br> <input type="checkbox"/> vertical<br> <input type="checkbox"/> steep<br> <input type="checkbox"/> moderate<br> <input type="checkbox"/> gentle<br> <input type="checkbox"/> stepped<br> <input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br> <input type="checkbox"/> flat<br> <input type="checkbox"/> concave<br> <input type="checkbox"/> v-shaped<br> <input type="checkbox"/> sloping<br> <input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br><input type="checkbox"/> design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |

(if you are using this section score out section **CUT** above)

### INTERPRETATION

[illegible]

### Basic process

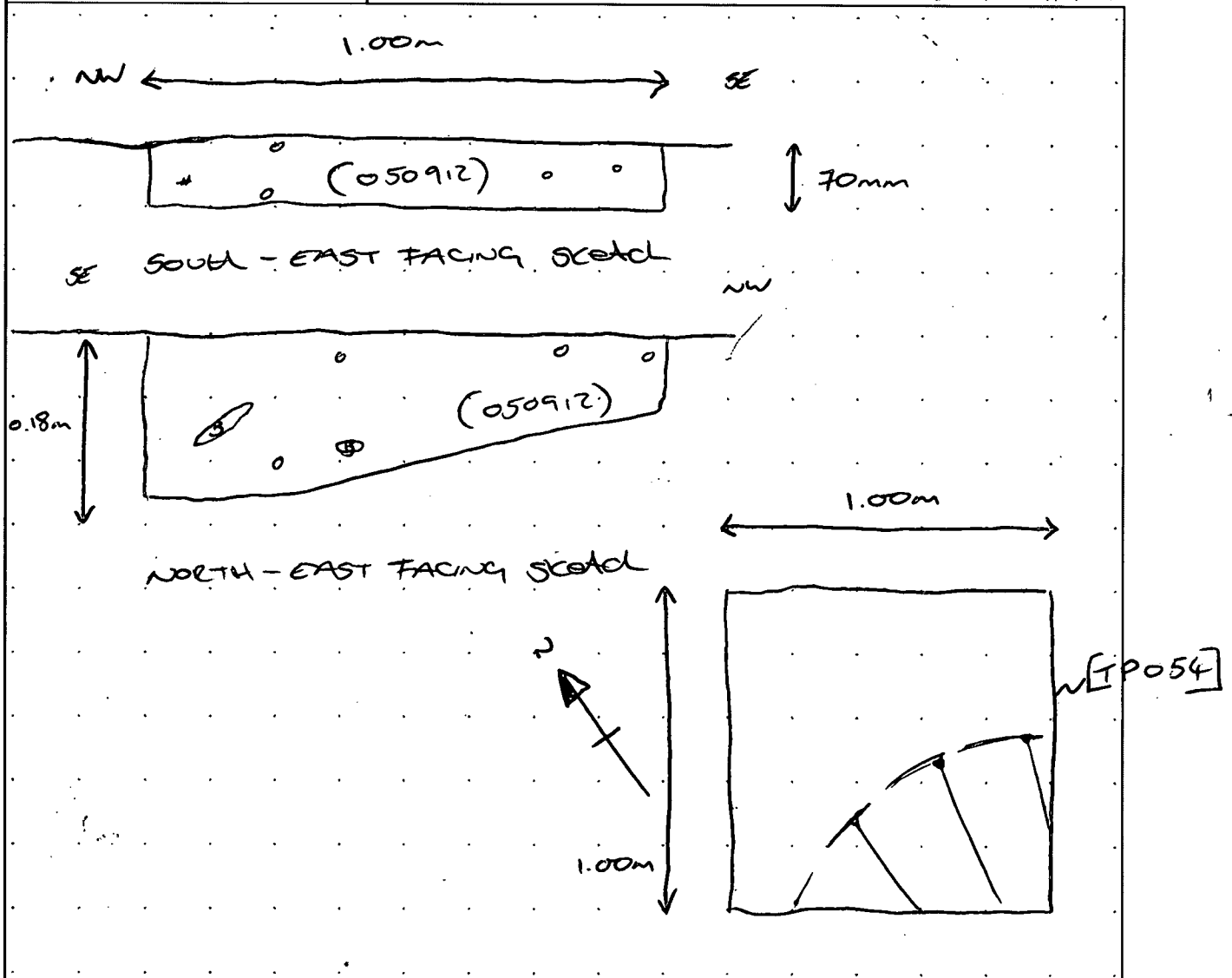
|                                                                                                   |                     |                      |                                                                                                                            |                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------|---------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br> | Finds nos<br>F55862 | Photo nos<br>0500646 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/><br>Date 23/8/<br>Initials BC<br>Checked by L.B.B. |
|---------------------------------------------------------------------------------------------------|---------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|

This form is incomplete if fields marked with ▼ are empty. PTO for additional information (and describing all items marked with \*) and sketches.

TEST PIT 054 Put THROUGH OCCUPATION LAYER  
TEST PIT 1m x 1m & shows DEPOSIT TO INCREASE  
IN DEPTH TOWARDS THE SOUTH - EAST.  
Deposit included MOD. SMALL ANGULAR GRAVELS &  
occ. charcoal flecks.

Refer to context —

SKETCHES  
(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



TP 056

MOLA HEADLAND  
INFRASTRUCTURE

## CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A16</b> | Area/Field<br><b>TEAS</b> | Sub-area/Trench<br><b>1</b>       | Context number<br><b>(050913)</b>                                                                                      |
| ECB #                   | Subgroup                  | Parent context<br><b>(050913)</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>050100</b>   |  |  | Same as context |
|  |  | <b>(050913)</b> |  |  | Cuts context    |
|  |  |                 |  |  | Cut by context  |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                 |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                      |  | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input type="checkbox"/> steep<br>L <input type="checkbox"/> moderate sloping<br>L <input type="checkbox"/> gentle<br>L <input type="checkbox"/> stepped<br>L <input type="checkbox"/> undercutting<br>L <input type="checkbox"/> complex* |              | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>X <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                            |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------|--------------|-------|-----|------------------|-----|----------------|-----------------|-------|-------|------------------|---------|--------------|-------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |         | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input checked="" type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |          | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat |          | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input checked="" type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |       |
| <b>Thickness</b><br><b>0.15m</b>                                                                                                                                                      |         | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |          | other* <input type="checkbox"/>                                                                                                                                                                                                                                            |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |       |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                            |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |       |
| frequency                                                                                                                                                                             | stones* | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan | manganese                                                                                                                                                                                                                                                                  | charcoal |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains* | wood | marine shell | bone* | pot | fired clay / CBM | CTP | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone | price |
| bulk find                                                                                                                                                                             |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                            |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |       |

## CROSS REFERENCE

|            |                                                              |                             |                                                                                                                            |
|------------|--------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos<br><b>P55867</b><br><b>F55868</b><br><b>P55869</b> | Photo nos<br><b>05006S1</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|------------|--------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☐ disuse ☒Date **23/08/17**Initials **AC**Checked by **L. B. B.**

This form is incomplete if fields marked with ▼ are empty. PTO for additional information (and describing all items marked with \*) and sketches.

Sieve  
finds

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

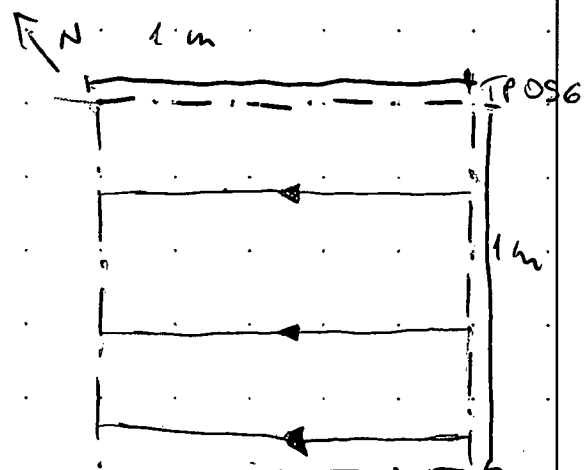
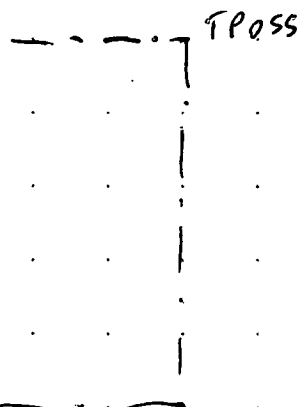
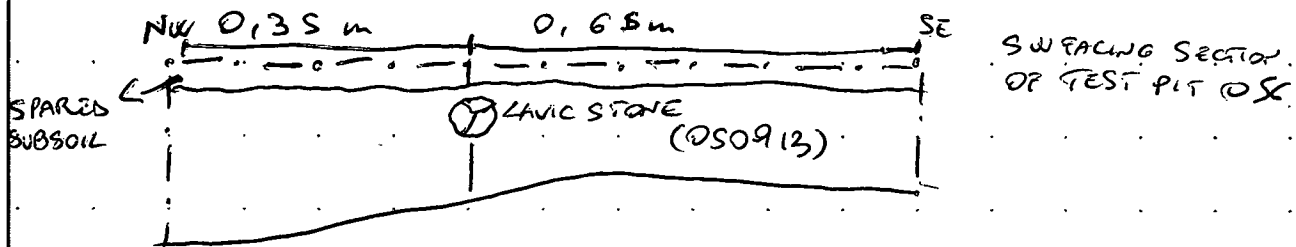
THE DEPOSIT LOOKS DIFFERENT FROM THE DARK ONE THAT COVERS THE AREA OF THE SUPPOSED "VILLA".

ON TOP OF THE SLOT THERE WAS A SHALLOW LAYER OF ~~SPARS~~ SPARSE SUBSOIL MORE BROWNISH AND WITH A VERY FREQUENT CONCENTRATION OF NATURAL FLINT. THE DEPOSIT IS A GRAY BASED CLAY, A LITTLE BIT TITLED, IT LOOKS MORE LIKE A FILL OF A DITCH THAN ~~THE~~ THE DARK DEPOSIT. OCCASIONAL PIECES OF CHARCOAL AND ~~SPARS~~ BIG FRAGMENTS OF NATURAL FLINTS (0,07-0,15 m). THERE WAS A BIG FRAGMENT OF LAVIC STONE (LIKE PORCE) CLOSE TO THE SW FACING SECTION (IT'S VISIBLE IN THE PHOTO) MAYBE USED AS BUILDING MATERIAL (IT WAS FREQUENT DURING THE ROMAN AGE FOR IDRAULIC BUILDINGS). THE AERIAL PHOTO SHOWS A SYSTEM OF DITCHES UNDER THE DARK SPREAD. MAYBE THIS SLOT IS IN ONE OF THE DITCH, NOT VISIBLE ~~ON~~ ON THE SURFACE.

Refer to context: NTS

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)





MOLA HEADLAND  
INFRASTRUCTURE

## CONTEXT SHEET

|                         |                            |                                   |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>1</b>       | Context number<br><b>(050914)</b>                                                                                      |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>       | Parent context<br><b>(050914)</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |               |  |                          |
|--|--|-----------------|---------------|--|--------------------------|
|  |  | <b>(050100)</b> | <b>allium</b> |  | Same as context <b>—</b> |
|  |  | <b>(050914)</b> |               |  | Cuts context <b>—</b>    |
|  |  |                 |               |  | Cut by context <b>—</b>  |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                              |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                              |              |                                                                                                                                                                                                                                   | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) <input type="checkbox"/> |                 |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br><input checked="" type="checkbox"/> N<br><input type="checkbox"/> S                                                            |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                              |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |
|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                              |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                                                                                                                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat |                          | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input checked="" type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) <input type="checkbox"/> |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| <b>Thickness</b><br><b>0.40m</b>                                                                                                                                                      |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                                                                                                                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| frequency                                                                                                                                                                             | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | iron pan                 | manganese                                                                                                                                                                                                                                                                             | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | plant remains*           | wood                     | marine shell             | bone*                               | pot                                 | fired clay / CBM                    | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                               | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                              | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

sieve finds

## CROSS REFERENCE

|                              |                                                               |                                                 |                                                                                                                            |
|------------------------------|---------------------------------------------------------------|-------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S 05095</b> | Finds nos<br><b>P55874</b><br><b>F55875</b><br><b>F 55639</b> | Photo nos<br><b>0500661</b><br><b>→ 0500663</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|------------------------------|---------------------------------------------------------------|-------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☐ disuse ☒Date **25/08/17**Initials **AL**

Checked by

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Test pit 055 in the E side in the dark earth spread.

- Moderately compact ~~composition~~ <sup>comp</sup>, mid orangeish greyish brown, silty sandy clay composition.
- Moderate presence of small stones and gravels, occasional inclusions of chalk, occasional presence of charcoal, occasional small pieces of CBN.
- split 1  $\Rightarrow$  6 small <sup>bone</sup> pieces / 19 <sup>probably</sup> potsherds (one is from a mortar vessel)
- split 2  $\Rightarrow$  16 potsherds / 1 small p. of an <sup>head</sup> bone / 1 iron nail (F55639) / 8 bags for sieving
- split 3  $\Rightarrow$  15 p of animal bones / 6 potsherds / 8 bags for sieving
- split 4  $\Rightarrow$  17 p of animal bones / 11 potsherds / 8 bags for sieving

In total: 45 p of animal bones

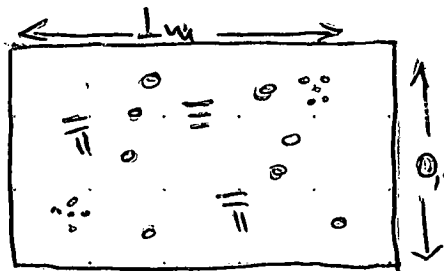
52 potsherds

33 bags for sieving.

Refer to context

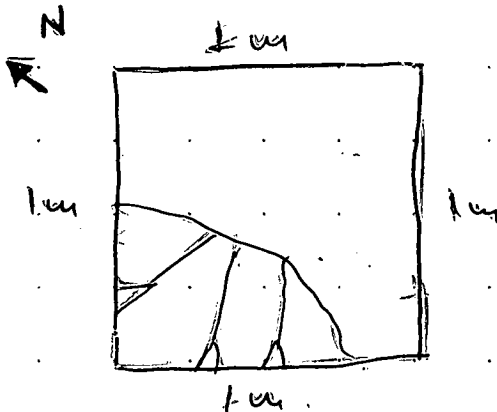
## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



- sand
- clay
- silt
- stone-gravels

S.W. Facing Section.



|                         |                           |                             |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA5</b> | Sub-area/Trench<br><b>-</b> | Context number<br><b>(050915)</b>                                                                                      |
| ECB #<br><b>-</b>       | Subgroup<br><b>-</b>      | Parent context<br><b>-</b>  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |                                                                                   |  |  |                 |   |
|--|--|-----------------------------------------------------------------------------------|--|--|-----------------|---|
|  |  | (050002)                                                                          |  |  | Same as context | - |
|  |  | (050915)                                                                          |  |  | Cuts context    | - |
|  |  |  |  |  | Cut by context  | - |

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                               |              |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                               |              |                 |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>II <input type="checkbox"/> E-W<br>III <input type="checkbox"/> NE-SW<br>IV <input type="checkbox"/> NW-SE<br><br>N<br>                             | <b>Sides</b><br>] <input type="checkbox"/> vertical<br>\ <input type="checkbox"/> steep<br>/ <input type="checkbox"/> moderate<br>~ <input type="checkbox"/> gentle<br>~ <input type="checkbox"/> stepped<br>Z <input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>~ <input type="checkbox"/> complex* |              |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                             | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                               |              |                 |

### INTERPRETATION

[illegible]

### Basic process

|                     |                    |                          |                                                                                                                                     |                                                                                                                                                                                         |
|---------------------|--------------------|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><br>— | Finds nos<br><br>— | Photo nos<br><br>0500652 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/><br><br>— | basic process<br>construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/><br>Date 23/08/17<br>Initials P.T.<br>Checked by J. B. B. |
|---------------------|--------------------|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

# ADDITIONAL INFORMATION

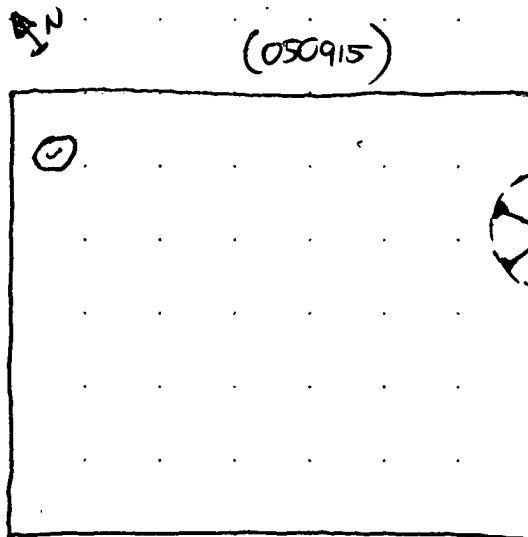
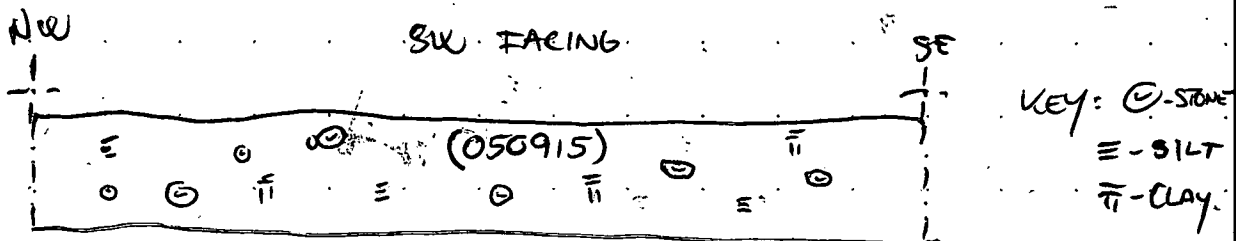
(any further details that may be important for understanding the context, including items marked \* overlaid)

(050915) IS A RELATIVELY SHALLOW MID-DARK BROWN DEPOSITION OF AN OCCUPATION LAYER, POSSIBLY ROMAN. THIS IS BASED BY THE FINDS WHICH ARE BROKEN PIECES OF POTS, ANIMAL BONE FRAGMENTS AND CBM. THIS FILL IS SLIGHTLY GRAVELLY AT PLACES, ONLY A BIT DARKER THAN THE DEPOSITION BELOW, WHICH HAS CHARCOAL INCLUSIONS.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



# MOLA HEADLAND INFRASTRUCTURE



~~7059~~ 7059

## CONTEXT SHEET

|                         |                           |                             |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>(050916)</b>                                                                                      |
| ECB #<br><b>-</b>       | Subgroup<br><b>-</b>      | Parent context<br><b>-</b>  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                     |                |  |                          |
|--|--|---------------------|----------------|--|--------------------------|
|  |  | <b>(050002)</b>     | <b>Subsoil</b> |  | Same as context <b>-</b> |
|  |  | <b>(050916)</b>     |                |  | Cuts context <b>-</b>    |
|  |  | <b>NOT RECORDED</b> |                |  | Cut by context <b>-</b>  |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |               |                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                             | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>H <input type="checkbox"/> E-W<br>↗ <input type="checkbox"/> NE-SW<br>↘ <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                      |               | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>\ <input type="checkbox"/> steep<br>/ <input type="checkbox"/> moderate<br>~ <input type="checkbox"/> gentle<br>~ <input type="checkbox"/> stepped<br>L <input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br>— <input type="checkbox"/> flat<br>U <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                              | <b>Depth</b> | <b>Diameter</b>                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |               |                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                          | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input checked="" type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| <b>Thickness</b><br><b>0.15</b>                                                                                                                                                       |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| frequency                                                                                                                                                                             | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                      | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains*           | wood                     | marine shell             | bone*                               | pot                                 | fired clay / CBM                    | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal <b>SMALL</b>                  | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### CROSS REFERENCE

|                             |                                             |                             |                                                                                                                            |
|-----------------------------|---------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S05096</b> | Finds nos<br><b>F55632</b><br><b>F55906</b> | Photo nos<br><b>0500654</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|-----------------------------|---------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------|
| <b>Basic process</b><br>construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>24/08/17</b><br>Initials <b>MG</b><br>Checked by <b>J. B. S.</b>                                                              |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

THIS DEPOSIT WAS EXCAVATED IN A 1x1 M TEST PIT.

DEPOSIT INCLUDED STONES IN FORM OF GRAVEL AND ONLY OCCASIONAL SMALL PARTICLE OF CHALK.

OVER ITS DEPTH (0.15M), IT WAS EXCAVATED - IN TWO SPITS. SPIT ONE ~~AND~~ CONTAINED SEVERAL POT SHEARDS (34); BONE FRAGMENTS (20, ANIMAL); LBM (9, TILE AND UPK POW) AND ~~AND~~ AN IRON NAIL HEAD (F55032). SPIT 2 ONLY INCLUDED A DETORATED POT SHEED AND 3 BONE FRAGMENTS.

DEPOSIT IS FOR A LARGE PART EVENLY 0.10M DEEP, BUT DEEPENS IN THE NORTH-WEST (TOP LEFT) CORNER.

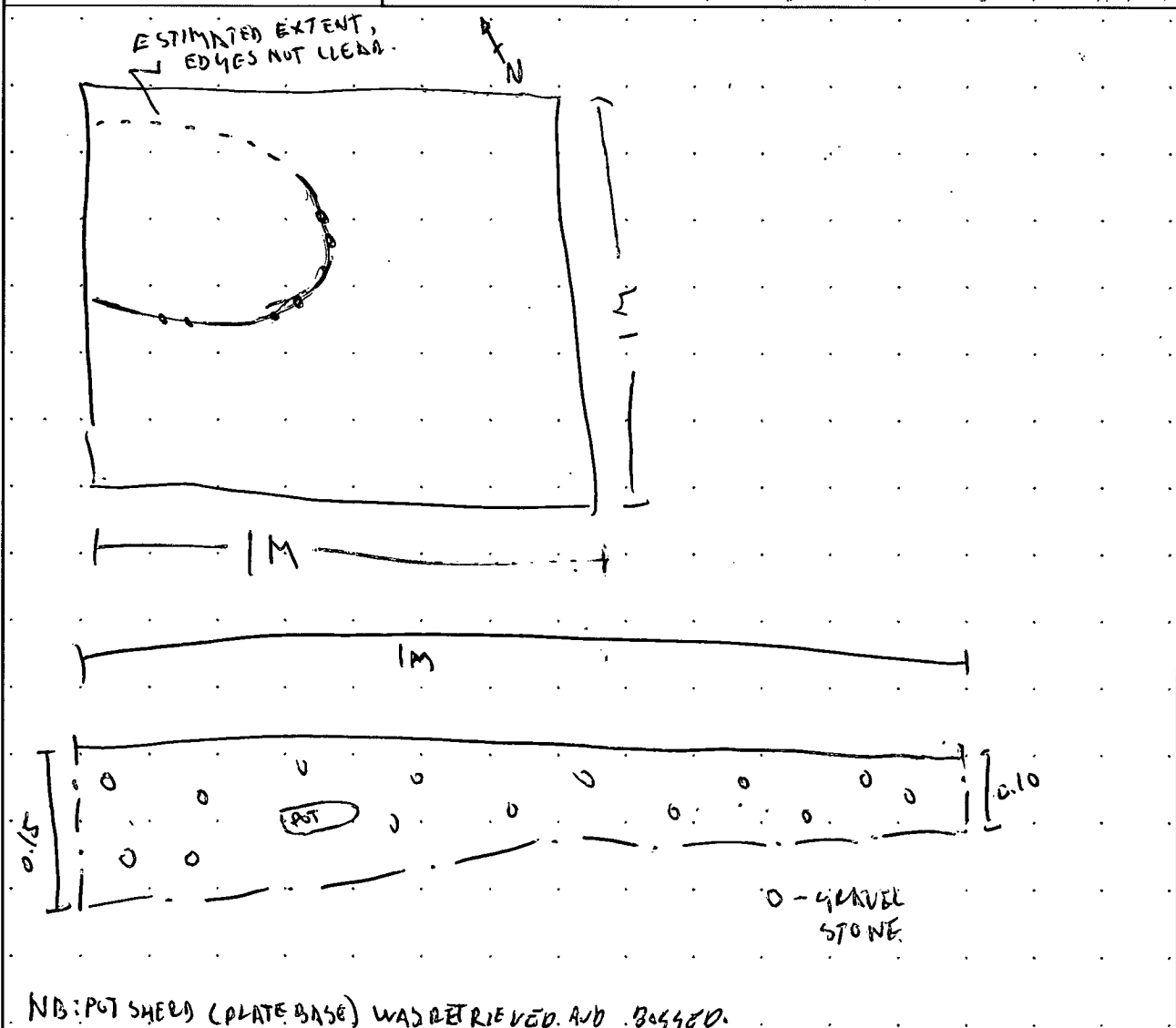
<sup>sub</sup> FULL EXTENT IS

IN PLAN, A CIRCULAR FEATURE CAN BE SEEN, BUT ITS ~~ON~~ NOT CLEARLY VISIBLE.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)





**MOLA**  
**HEADLAND**  
**ARCHAEOLOGY**

## CONTEXT SHEET

|                  |                    |                      |                                                                                                             |
|------------------|--------------------|----------------------|-------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA5 | Sub-area/Trench<br>1 | Context number<br>0509.7                                                                                    |
| ECB #<br>—       | Subgroup<br>—      | Parent context       | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |                                                                                   |  |  |                 |   |
|--|--|-----------------------------------------------------------------------------------|--|--|-----------------|---|
|  |  | 050002                                                                            |  |  | Same as context | — |
|  |  | 050917                                                                            |  |  | Cuts context    | — |
|  |  |  |  |  | Cut by context  | — |

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE | <b>Sides</b><br> <input type="checkbox"/> vertical<br> <input type="checkbox"/> steep<br> <input type="checkbox"/> moderate<br> <input type="checkbox"/> gentle<br> <input type="checkbox"/> stepped<br> <input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br> <input type="checkbox"/> flat<br> <input type="checkbox"/> concave<br> <input type="checkbox"/> v-shaped<br> <input type="checkbox"/> sloping<br> <input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |

### INTERPRETATION

|                                                                                                                                                                  |   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |          |           |          |                |                                                                                                                                                                                                                                                                                                                                                          |              |       |     |                  |     |                |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |       |                  |         |              |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------|-----------|----------|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------|-----|------------------|-----|----------------|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------------------|---------|--------------|--|--|
| <b>Compaction</b>                                                                                                                                                |   | <b>Colour</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |       |          |           |          |                | <b>Composition</b>                                                                                                                                                                                                                                                                                                                                       |              |       |     |                  |     |                |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |       |                  |         |              |  |  |
| <input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |   | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown<br>greyish <input checked="" type="checkbox"/> <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> <input type="checkbox"/> red<br>blueish <input type="checkbox"/> <input type="checkbox"/> blue |       |          |           |          |                | clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> <input type="checkbox"/> silt<br>sandy <input type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat |              |       |     |                  |     |                |                 | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |       |                  |         |              |  |  |
| <b>Thickness</b>                                                                                                                                                 |   | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |       |          |           |          |                | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                          |              |       |     |                  |     |                |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |       |                  |         |              |  |  |
| <b>Inclusions</b>                                                                                                                                                |   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |          |           |          |                |                                                                                                                                                                                                                                                                                                                                                          |              |       |     |                  |     |                |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |       |                  |         |              |  |  |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |   | stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | chalk | iron pan | manganese | charcoal | plant remains* | wood                                                                                                                                                                                                                                                                                                                                                     | marine shell | bone* | pot | fired clay / CBM | CTP | mortar/plaster | leather/textile | glass                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | metal | industrial waste | lithics | coarse stone |  |  |
| frequency                                                                                                                                                        | M |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |          |           |          |                |                                                                                                                                                                                                                                                                                                                                                          |              | O     | O   | O                |     |                |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |       |                  |         |              |  |  |
| bulk find                                                                                                                                                        |   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |          |           |          |                |                                                                                                                                                                                                                                                                                                                                                          |              | X     | X   | X                |     |                |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |       |                  |         |              |  |  |

### Basic process

|                                                                                                |                                         |                      |                     |                                                                                                               |
|------------------------------------------------------------------------------------------------|-----------------------------------------|----------------------|---------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos                                                                                     | Finds nos<br>F55870<br>F55871<br>F55872 | Photo nos<br>0500657 | Drawing nos         | <input type="checkbox"/> construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse |
| Surveyed:                                                                                      |                                         |                      | Date 24/8/17        |                                                                                                               |
| plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |                                         |                      | Initials JK         |                                                                                                               |
|                                                                                                |                                         |                      | Checked by L. S. S. |                                                                                                               |

Sieve -  
Linds

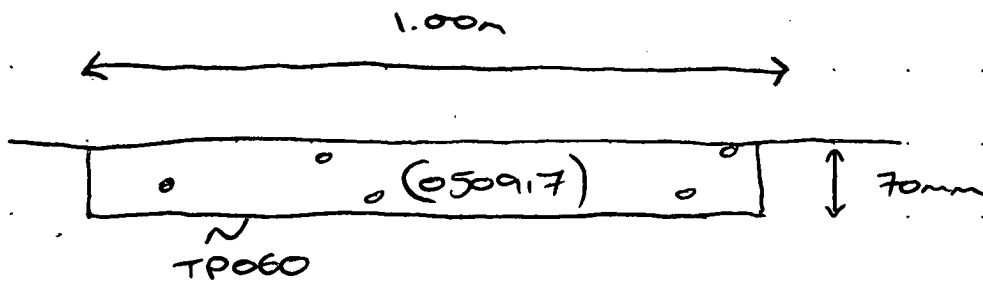
This form is incomplete if fields marked with ▼ are empty. PTO for additional information (and describing all items marked with \*) and sketches.

1m x 1m TEST PIT 060 PUT THROUGH OCCUPATION  
LAYER INCLUDING DEPOSIT (050917).  
DEPOSIT CARBELY CLAY BASED WITH 100 SMALL  
ANGULAR STONES, OCC A BONE, POTTERY & CBM  
FRAGS.

Refer to context

—

SKETCHES  
(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



SOUTH - WEST FACING SECTION SKETCH



TP 016

|                  |                     |                            |                                                                                                                        |
|------------------|---------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TCA 5 | Sub-area/Trench<br>1       | Context number<br>(050918)                                                                                             |
| ECB #<br>/       | Subgroup<br>/       | Parent context<br>(050918) | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (050002) |  |  | Same as context |
|  |  | (050918) |  |  | Cuts context    |
|  |  |          |  |  | Cut by context  |

(if you are using this section score out section **FILL/DEPOSIT** below)

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |              |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |              |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE | <b>Sides</b><br> <input type="checkbox"/> vertical<br> <input type="checkbox"/> steep<br> <input type="checkbox"/> moderate<br> <input type="checkbox"/> gentle<br> <input type="checkbox"/> stepped<br> <input type="checkbox"/> undercutting<br> <input type="checkbox"/> complex* | <b>Base</b><br> <input type="checkbox"/> flat<br> <input type="checkbox"/> concave<br> <input type="checkbox"/> v-shaped<br> <input type="checkbox"/> sloping<br> <input type="checkbox"/> uneven<br> <input type="checkbox"/> complex* |              |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>Width</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |              |                 |

(if you are using this section score out section **CUT** above)

### INTERPRETATION

[illegible]

### Basic process

|            |           |           |                                                                                                             |                                                                                                                                                   |
|------------|-----------|-----------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos | Drawing nos                                                                                                 | CROSS REFERENCE<br>Basic process<br>construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
|            |           | 0500693   | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |                                                                                                                                                   |
|            |           |           |                                                                                                             | Date 23/8/17<br>Initials SMG<br>Checked by L.B.S.                                                                                                 |

*This form is incomplete if fields marked with ▼ are empty. PTO for additional information (and describing all items marked with \*) and sketches.*

# ADDITIONAL INFORMATION

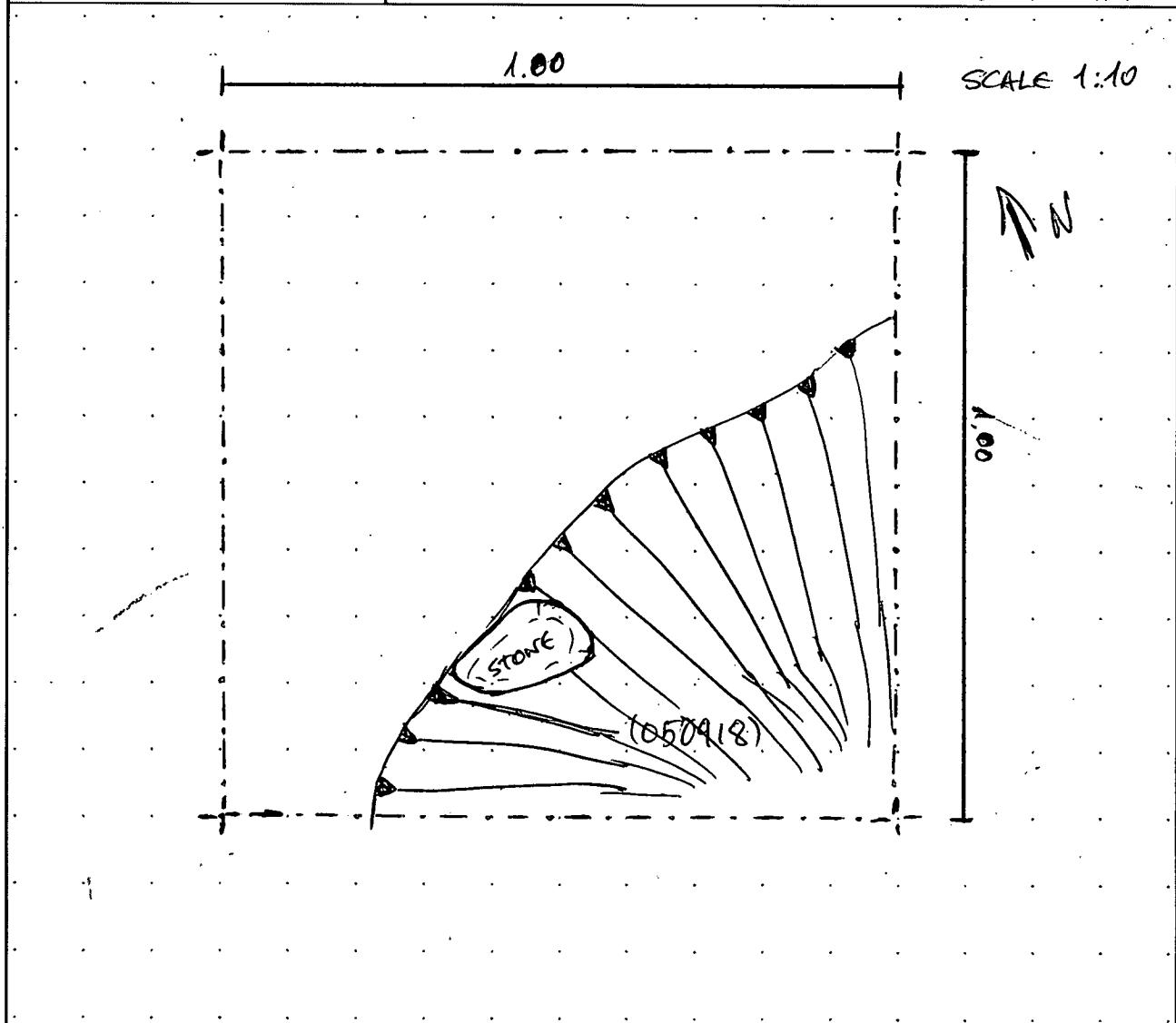
(any further details that may be important for understanding the context, including items marked \* overleaf)

THIS CONTEXT (050918) IS A DEPOSIT DARK GREY AND CLAY-SILTY GLASS STONES AND A FEW CHALK APPEAR IN THIS DEPOSIT. ONLY A SMALL BONE FRAGMENT I MEET IN THIS DEPOSIT. THE POTTERY ARE IRON AND ROMAN AGE AND ARE VERY ROUND AND ERODED. IT IS POSSIBLE THAT THIS DEPOSIT IS ALLUVIAL LAYER.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



## STRATIGRAPHY

|                                                                                   |                                                                                   |                                                                                   |                                                                                   |                                                                                    |                 |
|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------|-----------------|
|  |  |  |  |  | Same as context |
|                                                                                   |                                                                                   |  |                                                                                   |                                                                                    | Cuts context    |
|  |  |  |  |  | Cut by context  |

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">  <input type="checkbox"/> vertical<br/>  <input type="checkbox"/> steep<br/>  <input type="checkbox"/> moderate<br/>  <input type="checkbox"/> gentle<br/>  <input type="checkbox"/> stepped<br/>  <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div>           sloping         </div> </div> |              | <b>Base</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">  <input type="checkbox"/> flat<br/>  <input type="checkbox"/> concave<br/>  <input type="checkbox"/> v-shaped<br/>  <input type="checkbox"/> sloping<br/>  <input type="checkbox"/> uneven<br/> <input type="checkbox"/> complex*         </div> </div> |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |

### INTERPRETATION

| Compaction                                                        |                                                        | Colour                                                                                                                                |                                 | Composition                                                             |                               |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |
|-------------------------------------------------------------------|--------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-------------------------------------------------------------------------|-------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input checked="" type="checkbox"/> moderately compact | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/> |                                 | clayey <input checked="" type="checkbox"/>                              | <input type="checkbox"/> clay |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> friable                       | brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown                                                           | <input type="checkbox"/> grey   | silty <input type="checkbox"/> <input checked="" type="checkbox"/> silt | <input type="checkbox"/> sand |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |
|                                                                   |                                                        | greyish <input checked="" type="checkbox"/> <input type="checkbox"/> orange                                                           | <input type="checkbox"/> yellow | sandy <input type="checkbox"/> <input type="checkbox"/> gravel          | <input type="checkbox"/> peat |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |
|                                                                   |                                                        | orangeish <input type="checkbox"/> <input type="checkbox"/> red                                                                       | <input type="checkbox"/> blue   | gravelly <input type="checkbox"/>                                       |                               |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |
|                                                                   |                                                        | yellowish <input type="checkbox"/>                                                                                                    |                                 | peaty <input type="checkbox"/>                                          |                               |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |
|                                                                   |                                                        | reddish <input type="checkbox"/>                                                                                                      |                                 |                                                                         |                               |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |
|                                                                   |                                                        | blueish <input type="checkbox"/>                                                                                                      |                                 |                                                                         |                               |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |
| Thickness<br>1.8m                                                 |                                                        | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                         |                                 | other* <input type="checkbox"/>                                         |                               |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |
| Inclusions                                                        |                                                        |                                                                                                                                       |                                 |                                                                         |                               |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                                | chalk                                                                                                                                 | iron pan                        | manganese                                                               | charcoal                      | plant remains*           | wood                     | marine shell             | bone*                               | pot                                 | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                               | industrial waste         | lithics                  | coarse stone             |                          |
| frequency                                                         |                                                        | O                                                                                                                                     |                                 |                                                                         |                               |                          |                          |                          | M                                   | M                                   |                          |                          |                          |                          |                          | O                                   |                          |                          |                          |                          |
| bulk find                                                         | <input type="checkbox"/>                               | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/>        | <input type="checkbox"/>                                                | <input type="checkbox"/>      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### Basic process

|                                            |                    |                      |                                                                                                                            |                                                                                                                                                                                            |
|--------------------------------------------|--------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><del>A05103</del><br>S 05103 | Find nos<br>F55839 | Photo nos<br>0500673 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/><br>Date <b>31/8/17</b><br>Initials <b>D.D.C.</b><br>Checked by <b>L.B.B.</b> |
|--------------------------------------------|--------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

# ADDITIONAL INFORMATION

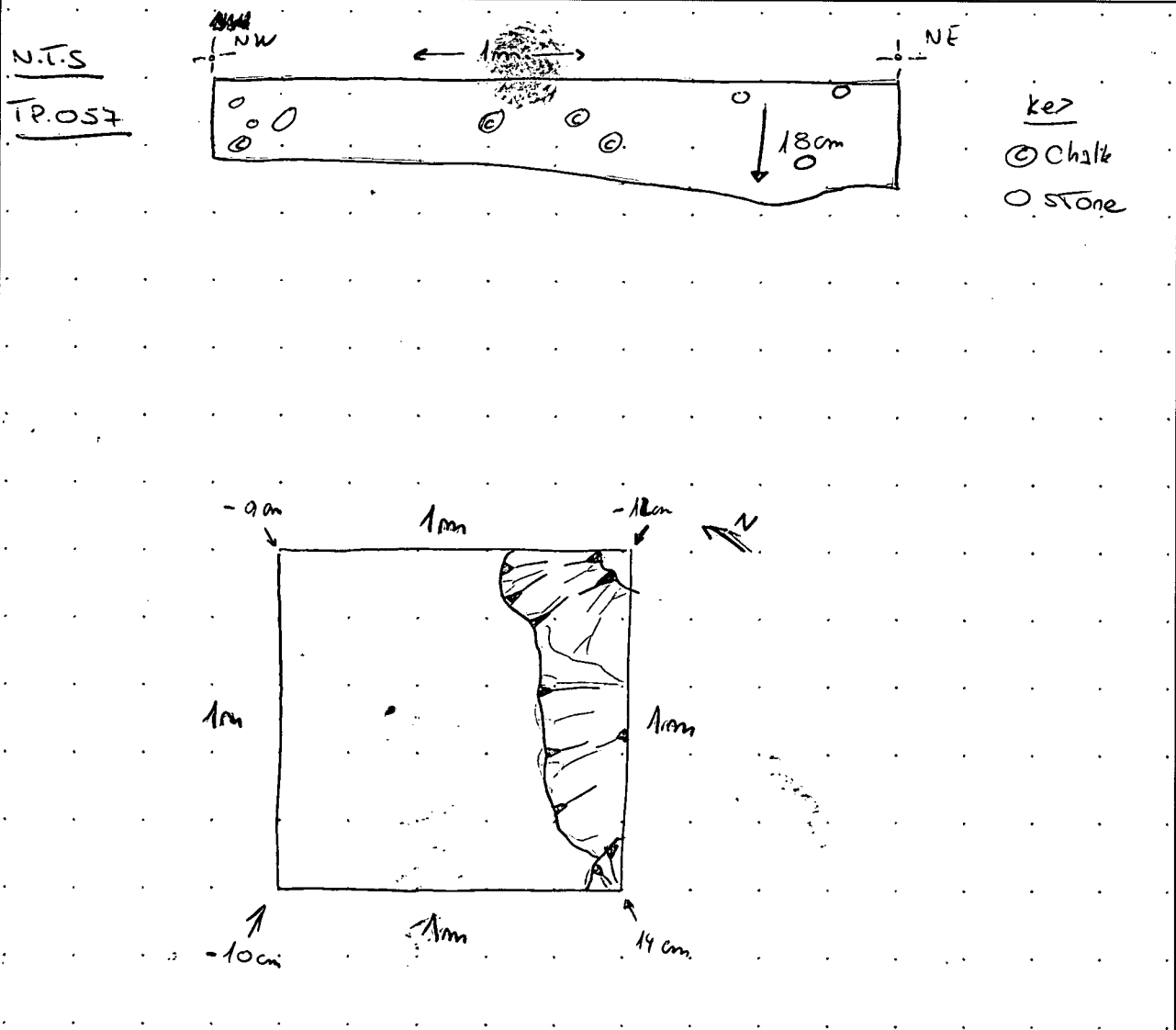
(any further details that may be important for understanding the context, including items marked "overleaf")

TEST PIT 057 in the dark earth spread.  
 Moderately compact. Occupation layer, dark brown greyish brown, ~~clayey~~ with a clayey silt composition. Occasional inclusions of ~~chert~~ chalk (small and big pieces), ~~chert~~ occasional gravels and small stones.  
 Split 1 → 10 cm depth / 19 Pot sherds of orange and grey clay / 8 pieces of CBM / 1 piece of iron, probably a nail, (F55839) / 8 animal bones  
 1 bucket environmental sample S05103

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)





## CONTEXT SHEET

|                  |                     |                  |                                                                                                                        |
|------------------|---------------------|------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA 5 | Sub-area/Trench  | Context number<br>(050920)                                                                                             |
| ECB # .          | Subgroup            | Parent context . | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (050002) |  |  | Same as context |
|  |  | (050920) |  |  | Cuts context    |
|  |  |          |  |  | Cut by context  |

CUT

(if you are using this section score out section **FILL/DEPOSIT** below)

## DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                 |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br>N<br>                                         | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                 | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br><input type="checkbox"/> design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>              |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                 |

**FILL/DEPOSIT**

(if you are using this section score out section CUT above)

## DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                                     |                                     |                                     |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input checked="" type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> <input type="checkbox"/> brown<br>greyish <input type="checkbox"/> <input checked="" type="checkbox"/> grey<br>orangeish <input type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> <input type="checkbox"/> red<br>blueish <input type="checkbox"/> <input type="checkbox"/> blue |                          | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> <input type="checkbox"/> clay<br>silty <input type="checkbox"/> <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat |                          | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                          |                          |                                     |                                     |                                     |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |
| <b>Thickness</b><br><b>0.14</b>                                                                                                                                                                  |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                                     |                                     |                                     |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                           |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                                     |                                     |                                     |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |
| frequency                                                                                                                                                                                        | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                      | charcoal                 | plant remains*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | wood                     | marine shell             | bone*                               | pot                                 | fired clay / CBM                    | CTP                      | mortar/plaster           | leather/textile          | glass                               | metal                               | industrial waste         | lithics                  | coarse stone             |                          |
|                                                                                                                                                                                                  | O O                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          | O                        | M                                   | F                                   | O                                   |                          |                          |                          | O                                   | O                                   |                          |                          |                          |                          |
| bulk find                                                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### CROSS REFERENCE

|                 |                                                              |                      |                                                                                                                            |
|-----------------|--------------------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>/ | Finds nos<br><del>F55701</del><br>F55880<br>F55881<br>F55882 | Photo nos<br>0500659 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|-----------------|--------------------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|

Basic process

construction ☐ use ☐ disuse ☒

Date 29/8/17

Initials J.O.S.

Checked by L.B.S.

F55883  
F55884

*This form is incomplete if fields marked with ▽ are empty. PTO for additional information (and describing all items marked with \*) and sketches.*

Sieve Finds

# ADDITIONAL INFORMATION

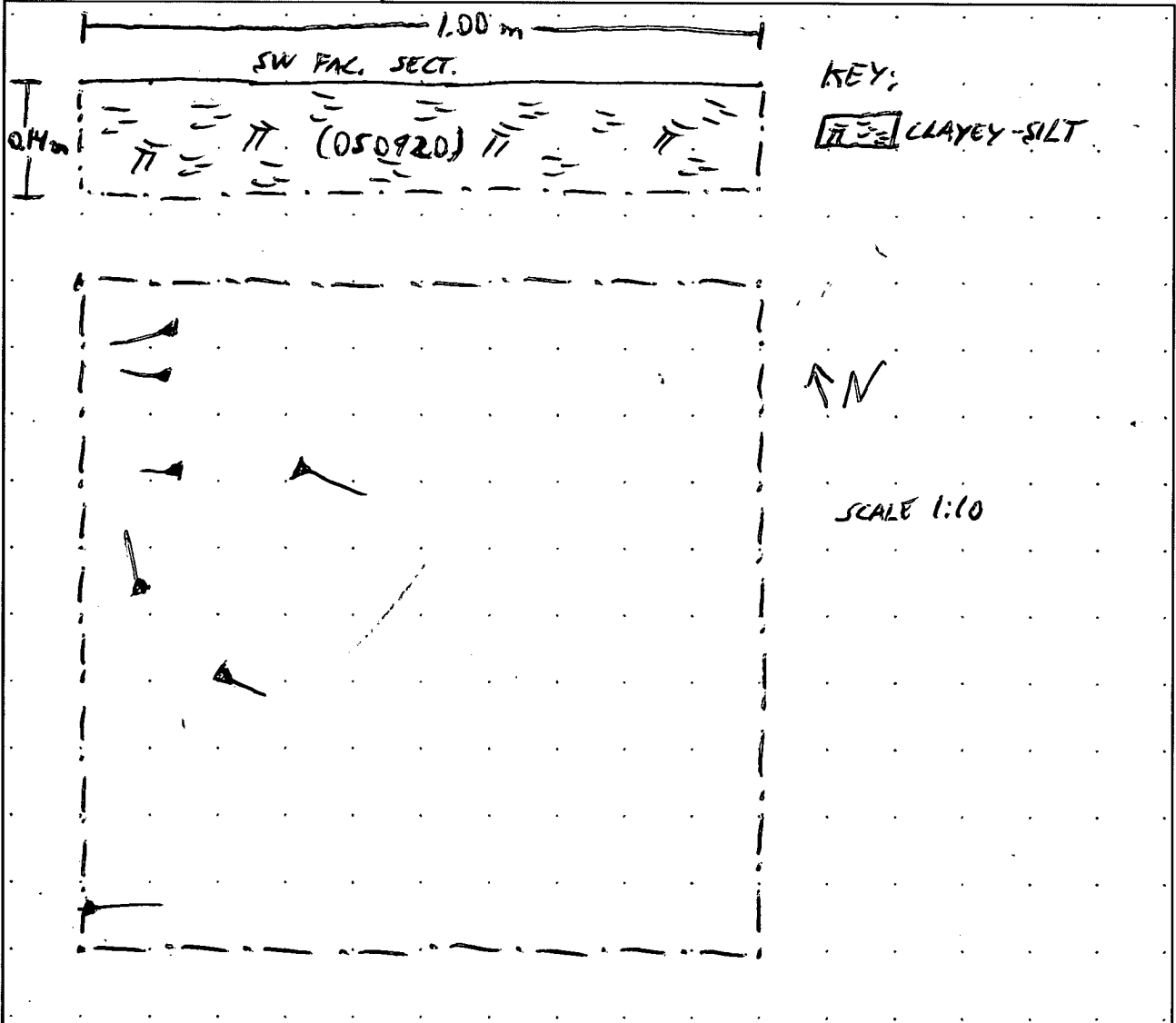
(any further details that may be important for understanding the context, including items marked \* overleaf)

Deposit (050920) of Test Pit # 032. It is located in the middle of the dark ~~clay~~ earth deposit, close to the L.O.E. This deposit ~~reaches~~ reaches 0.14m in the NW corner of the pit so it has been divided in 2 splits. The base is quite uniform, being the ~~up~~ higher part of it 0.10m tall and it is composed by a gravelly-clay layer. In this deposit there were lots of pottery and some animal bones; most pottery is from Roman Age - late Antiquity. At the bottom there was a piece of Iron and a ~~piece~~ fragment of glass. This context looks a digging or a colluvial deposition with lots of materials, that have been pulled ~~down~~ a lot of times.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



# MOLA HEADLAND INFRASTRUCTURE



TP067

## CONTEXT SHEET

|                         |                           |                             |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>050921</b>                                                                                        |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>      | Parent context<br><b>—</b>  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                          |
|--|--|---------------|--|--|--------------------------|
|  |  | <b>050002</b> |  |  | Same as context <b>—</b> |
|  |  | <b>050921</b> |  |  | Cuts context <b>—</b>    |
|  |  |               |  |  | Cut by context <b>—</b>  |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |               |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                      |               | <b>Sides</b><br>[ <input type="checkbox"/> vertical<br>[ <input type="checkbox"/> steep<br>[ <input type="checkbox"/> moderate<br>[ <input type="checkbox"/> gentle<br>[ <input type="checkbox"/> stepped<br>[ <input type="checkbox"/> undercutting<br>[ <input type="checkbox"/> complex* |              | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>[ <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                                | <b>Depth</b> | <b>Diameter</b>                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |               |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |               |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                                     | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                          | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input checked="" type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b>                                                                                                                                                                      |                                     | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                             | stones*                             | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                      | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains*           | wood                     | marine shell             | bone*                               | pot                                 | fired clay / CBM                    | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### CROSS REFERENCE

|                               |                                                 |                            |                                                                                                                            |
|-------------------------------|-------------------------------------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>5 050098</b> | Finds nos<br><b>F55920</b><br><b>sieve find</b> | Photo nos<br><b>050068</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|-------------------------------|-------------------------------------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☐ use ☐ disuse ☒

Date **24/8/17**

Initials **BC**

Checked by **J. B. A.**

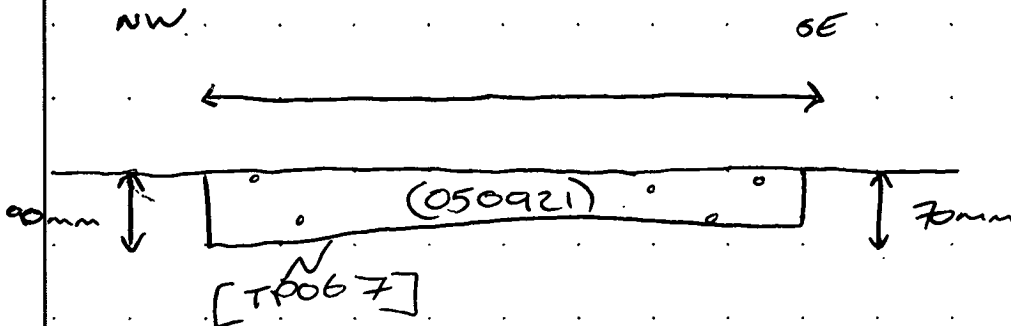
This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

1m X 1m TEST PIT THROUGH OCCUPATION LAYER  
INCLUDED DEPOSIT (050921)  
DEPOSIT LARGELY CLAY BASED WITH MOD. SMALL  
ANGULAR STONES, OCC. POTTERY FRAGS, OCC. CBM  
FRAGS & OCC. A. BONE FRAGS.

Refer to context: —

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



SOUTH - WEST FACING SECTION





|                         |                            |                             |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>050922</b>                                                                                        |
| ECB #<br>—              | Subgroup<br>—              | Parent context              | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

STRATIGRAPHIC MATRIX

STRATIGRAPHY

|  |  |               |  |  |                   |
|--|--|---------------|--|--|-------------------|
|  |  | <b>050002</b> |  |  | Same as context — |
|  |  | <b>050922</b> |  |  | Cuts context —    |
|  |  |               |  |  | Cut by context —  |

**CUT**

(if you are using this section score out section **FILL/DEPOSIT** below)

**DESCRIPTION**

**INTERPRETATION**

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                             |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                             |              |                 | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                      | <b>Sides</b><br>[ <input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex*<br>] sloping | <b>Base</b><br>— <input type="checkbox"/> flat<br>U <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                | <b>Width</b>                                                                                                                                                                                                                                | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                             |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

**FILL/DEPOSIT**

(if you are using this section score out section **CUT** above)

**DESCRIPTION**

**INTERPRETATION**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                         | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/><br>other* <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><b>90 mm</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency<br>bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | stones*<br>chalk<br>iron pan<br>manganese<br>charcoal<br>plant remains*<br>wood<br>marine shell<br>bone*<br>pot<br>fired clay / CBM<br>CTP<br>mortar/plaster<br>leather/textile<br>glass<br>metal<br>industrial waste<br>lithics<br>coarse stone                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 0 0 0                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| bulk find <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

CROSS REFERENCE

|                              |                |                                               |                                                                                                                            |
|------------------------------|----------------|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S 05099</b> | Finds nos<br>— | Photo nos<br><b>0500664</b><br><b>0500665</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|------------------------------|----------------|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

Basic process

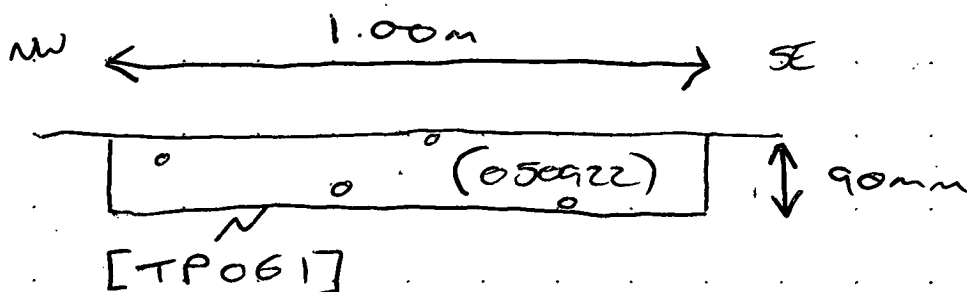
|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>25/8/17</b>                                                                                           |
| Initials <b>BK</b>                                                                                            |
| Checked by <b>L. A. B.</b>                                                                                    |

TEST PIT 061 THROUGH OCCUPATION LAYER  
INCLUDED DEPOSIT (050922).  
DEPOSIT INCLUDED MOD. SMALL ANGULAR STONES,  
OCC. A. BONE FRAGS, OCC POTTERY FRAGS, OCC.  
CBM FRAGS.

Refer to context: —

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



South - West Facing sketch section.

|           |            |                 |                                                                                             |
|-----------|------------|-----------------|---------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                              |
| A14       | TEA5       | 1               | 050923                                                                                      |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                |
|           |            |                 | cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |                                                                                   |  |  |                   |
|--|--|-----------------------------------------------------------------------------------|--|--|-------------------|
|  |  | 050002                                                                            |  |  | Same as context — |
|  |  | 050923                                                                            |  |  | Cuts context —    |
|  |  |  |  |  | Cut by context —' |

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE | <b>Sides</b><br> <input type="checkbox"/> vertical<br> <input type="checkbox"/> steep<br> <input type="checkbox"/> moderate<br> <input type="checkbox"/> gentle<br> <input type="checkbox"/> stepped<br> <input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br> <input type="checkbox"/> flat<br> <input type="checkbox"/> concave<br> <input type="checkbox"/> v-shaped<br> <input type="checkbox"/> sloping<br> <input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |

### INTERPRETATION

[illegible]

### Basic process

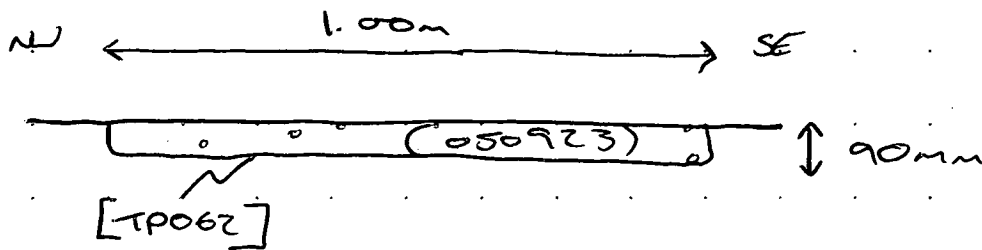
|                                                                                                   |                                                                                                  |                     |                                                                                                                                                                                                                    |                                                                                                               |
|---------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos<br> | Finds nos<br> | Photo nos<br>050666 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/><br> | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|                                                                                                   |                                                                                                  |                     |                                                                                                                                                                                                                    | Date 25/8/17                                                                                                  |
|                                                                                                   |                                                                                                  |                     |                                                                                                                                                                                                                    | Initials BC                                                                                                   |
|                                                                                                   |                                                                                                  |                     |                                                                                                                                                                                                                    | Checked by 2.2.8.                                                                                             |

TEST PIT 062 MEASURING 1m x 1m PUT  
THROUGH OCCUPATION LAYER.  
TEST PIT INCLUDED DEPOSIT (050923).  
HERE THE LAYER IS VERY SHALLOW MEASURING  
25mm AT ITS DEEPEST.  
DEPOSIT MADE UP OF FRABLE, CLAY SILT WITH  
~~MOD. S.M.~~ MOD. SMALL ANGULAR STONES, OCC.  
SMALL POTTERY FRAGS & OCC. A BONE FRAGS

Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



south - west facing sketch section

# MOLA HEADLAND INFRASTRUCTURE



TEA5063

## CONTEXT SHEET

|                         |                           |                             |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>050924</b>                                                                                        |
| ECB #<br>—              | Subgroup                  | Parent context              | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                   |
|--|--|---------------|--|--|-------------------|
|  |  | <b>050002</b> |  |  | Same as context — |
|  |  | <b>050924</b> |  |  | Cuts context —    |
|  |  |               |  |  | Cut by context —  |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                   | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |  |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br><input checked="" type="checkbox"/> N                                                                                          |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |  | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                         |  | <b>Width</b>                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <b>Depth</b>                                                                                                                                                                                                                                                                                 |  | <b>Diameter</b>                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |   | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |  | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |  | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input checked="" type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |
| <b>Thickness</b><br><b>0.10m</b>                                                                                                                                                      |   | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency                                                                                                                                                                             | M |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| bulk find                                                                                                                                                                             |   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

|                                              |                                             |                             |                                                                                                                            |
|----------------------------------------------|---------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>505000</b><br><b>505100</b> | Finds nos<br><b>F55930</b><br><b>F55853</b> | Photo nos<br><b>0500672</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|----------------------------------------------|---------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>30/8/17</b>                                                                                                      |
| Initials <b>BK</b>                                                                                                       |
| Checked by <b>L.N.A.</b>                                                                                                 |

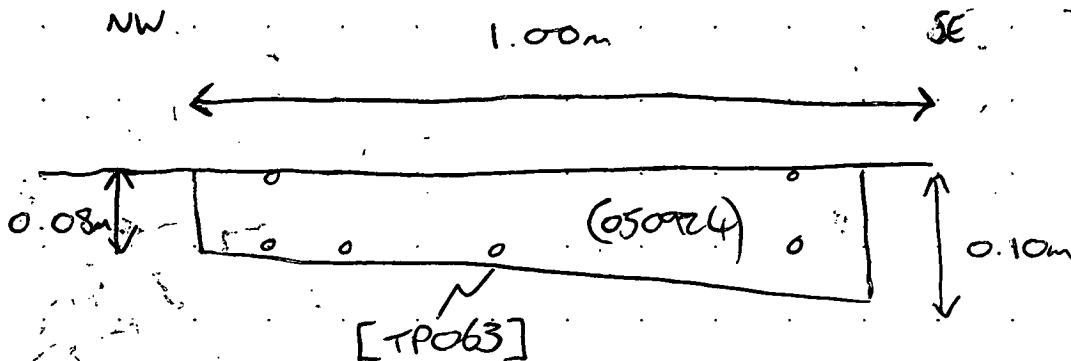
This form is incomplete if fields marked with \* are empty. P/O for additional information (and describing all items marked with \*) and sketches.

1m x 1m TP063 THROUGH DARK EARTH OCCUPATION LAYER.  
INCLUDED DEPOSIT (050924) WHICH HAD MOD.  
SMALL ANGULAR GRAVELS, OCC. POTTERY FRAGS,  
OCC. A. BONE FRAGS.

Refer to context —

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



# MOLA HEADLAND INFRASTRUCTURE



TPO70

## CONTEXT SHEET

|                         |                            |                             |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>(050925)</b>                                                                                      |
| ECB #<br><b>-</b>       | Subgroup<br><b>-</b>       | Parent context<br><b>-</b>  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                     |               |  |                          |
|--|--|---------------------|---------------|--|--------------------------|
|  |  | <b>(050002)</b>     | <b>SVBSQL</b> |  | Same as context <b>-</b> |
|  |  | <b>(050925)</b>     |               |  | Cuts context <b>-</b>    |
|  |  | <b>NOT RECORDED</b> |               |  | Cut by context <b>-</b>  |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |               |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                              | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br>                                                                                                                                   |               | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input checked="" type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b>                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |               |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <del>           (This section is crossed out with a large diagonal line)         </del>                                                                                                                                                                                                      |               |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                          |                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/><br>other* <input type="checkbox"/> |                          | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input checked="" type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b><br><b>0.15</b>                                                                                                                                                       |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                          |                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                             | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                                                         | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains*           | wood                     | marine shell             | bone*                               | pot                                 | fired clay / CBM                    | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### CROSS-REFERENCE

|                        |                                                                                                    |                             |                                                                                                                            |
|------------------------|----------------------------------------------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>/</b> | Finds nos<br><b>F55828</b><br><b>F55829</b><br><b>F55902</b><br><b>F55886</b><br><b>sieve find</b> | Photo nos<br><b>0500671</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|------------------------|----------------------------------------------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                |
|--------------------------------------------------------------------------------------------------------------------------------|
| Basic process<br>construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
|--------------------------------------------------------------------------------------------------------------------------------|

|                             |
|-----------------------------|
| Date<br><b>31/08/17</b>     |
| Initials<br><b>Ma</b>       |
| Checked by<br><b>L.B.B.</b> |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

DARK EARTH DEPOSIT, EXCAVATED AS PART OF TEST PIT 070. TEST PITS WERE BEING DUG AS PART OF A LARGER STRATEGY IN DEALING WITH A ROMAN OCCUPATIONAL LAYER (DARK SPREAD) ON TEA 5 PART 1.

DEPOSIT HAS VERY LIMITED CHALK STONE PARTICLES AND AN OCCASSIONAL CHARCOAL. IT ALSO INCLUDES AN OCCASSIONAL (UNDER 5) IRON PAIL "BALL".

IT WAS EXCAVATED TO THE DEPTH OF 0.15 M IN TWO SPITS. SPIT 1, TOP LAYER, PRODUCED POT, BONE AND IRON SLAG, WHILE SPIT 2 (BOTTOM 0.05 M) PRODUCED POT, BONE, IRON SLAG, ~~AND~~ AS WELL AS TWO NAILS (F55828, F55829), SOME CBM PARTICLES. ~~AND~~

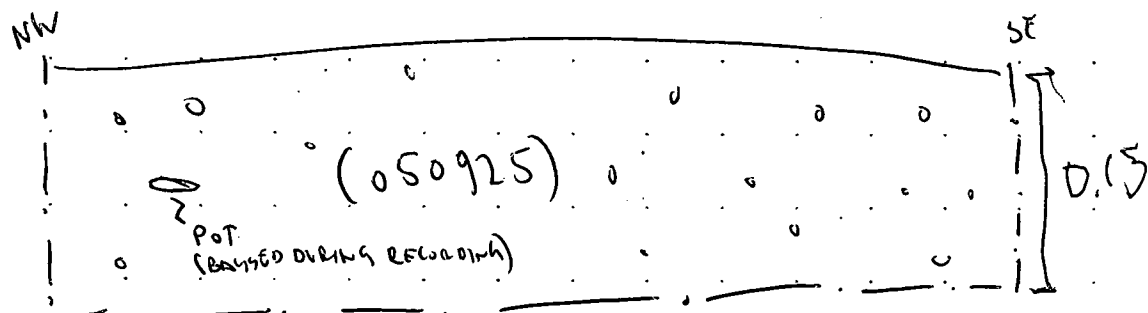
BELOW THIS DEPOSIT IS A DEPOSIT/FILL WITH A MORE PRONOUNCED GREY HUE AND A HIGHER CHARCOAL DENSITY. IT WAS NOT RECORDED NOR EXCAVATED.

Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

SOUTH WEST FACING SECTION:



NOTE: DEPOSIT LAYS FLAT ON FILL/DEPOSIT BENEATH IT. THERE WERE NO VISIBLE FEATURES IN PLAN, SO PLAN SKETCH WAS NOT DEEMED NECESSARY.



# MOLA HEADLAND INFRASTRUCTURE



TP 0.69

## CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEAS</b> | Sub-area/Trench<br><b>1</b>       | Context number<br><b>(050926)</b>                                                                                      |
| ECB #                   | Subgroup                  | Parent context<br><b>(050926)</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>050100</b>   |  |  | Same as context |
|  |  | <b>(050926)</b> |  |  | Cuts context    |
|  |  |                 |  |  | Cut by context  |

### CUT

(if you are using this section score out section **FILL/DEPOSIT** below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              | <p>pit <input type="checkbox"/></p> <p>post-hole <input type="checkbox"/></p> <p>stake-hole <input type="checkbox"/></p> <p>ditch <input type="checkbox"/></p> <p>ring-ditch <input type="checkbox"/></p> <p>beam slot <input type="checkbox"/></p> <p>construction cut <input type="checkbox"/></p> <p>robber cut <input type="checkbox"/></p> <p>gully <input type="checkbox"/></p> <p>palaeochannel <input type="checkbox"/></p> <p>furrow <input type="checkbox"/></p> <p>field boundary <input type="checkbox"/></p> <p>burial cut <input type="checkbox"/></p> <p>other cut (describe below) <input type="checkbox"/></p> |  |                 |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input type="checkbox"/> steep<br>L <input type="checkbox"/> moderate sloping<br>L <input type="checkbox"/> gentle<br>L <input type="checkbox"/> stepped<br>L <input type="checkbox"/> undercutting<br>L <input type="checkbox"/> complex* | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>S <input type="checkbox"/> sloping<br>U <input type="checkbox"/> uneven<br>C <input type="checkbox"/> complex* |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                 |

### FILL/DEPOSIT

(if you are using this section score out section **CUT** above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | <p>topsoil <input type="checkbox"/></p> <p>subsoil <input type="checkbox"/></p> <p>geological subsoil <input type="checkbox"/></p> <p>remnant topsoil <input type="checkbox"/></p> <p>surface <input type="checkbox"/></p> <p>occupation layer <input checked="" type="checkbox"/></p> <p>dumped layer <input type="checkbox"/></p> <p>deliberate backfill <input type="checkbox"/></p> <p>destruction debris <input type="checkbox"/></p> <p>bedding layer <input type="checkbox"/></p> <p>natural infilling <input type="checkbox"/></p> <p>colluvial layer <input type="checkbox"/></p> <p>in situ burning <input type="checkbox"/></p> <p>post-pipe <input type="checkbox"/></p> <p>packing <input type="checkbox"/></p> <p>cremation <input type="checkbox"/></p> <p>other fill/deposit (describe below) <input type="checkbox"/></p> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b>                                                                                                                                                                      | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                             | stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | chalk                                                                                                                                                                                                                                                                                                                                                                          | iron pan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | manganese                | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### CROSS REFERENCE

|                              |                                                                             |                            |                                                                                                                            |
|------------------------------|-----------------------------------------------------------------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S 05101</b> | Finds nos<br><b>F 55840<br/>F 55841<br/>F 55842<br/>F 55918<br/>F 55919</b> | Photo nos<br><b>050675</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|------------------------------|-----------------------------------------------------------------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☐ use ☐ disuse ☒

Date **31/08/17**

Initials **AC**

Checked by **L.B.B.**

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

Sieve small finds

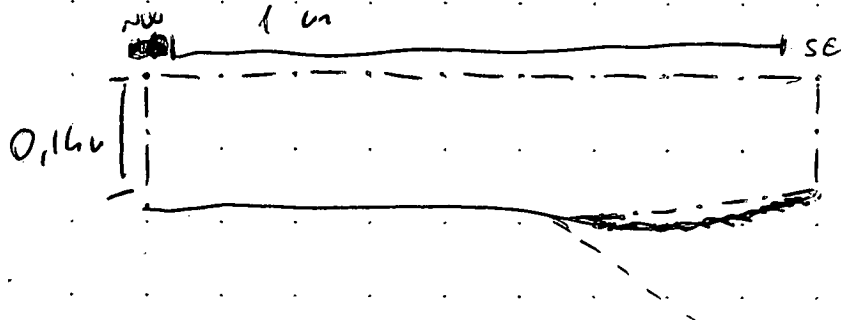
THIS DEPOSIT IS NOT THAT DARK LIKE THE ONE THAT COVERS THE <sup>AREA OF THE</sup> SUPPOSED 'VILLA' AND IT'S ALSO MORE CLAYEY THAN SILTY.  
THE LAYER IS NOT ~~COMPLETELY~~ FULLY EXCAVATED BUT, BECAUSE IN THE NW CORNER WAS FOUND A DIFFERENT LAYER, IT WAS LEFT AT THAT QUOTE (0.14 m).  
FREQUENT CHARCOAL AND SMALL POTSHERDS.  
THERE WERE ALSO THREE IRON NAILS AND A BIG POTSHERD OF ROMAN POTTERY WITH A PECULIAR RIM AND DECORATION.  
IT'S NOT CLEAR THE NATURE OF THIS DEPOSIT.

Refer to context

ITS

SKETCHES  
(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

SW FACING SECTION  
OF TP 069



TP 062

↑ N

TP 069

(050926)

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                           |                                |                                                                                                             |
|-------------------------|---------------------------|--------------------------------|-------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEAS</b> | Sub-area/Trench<br><b>1</b>    | Context number<br><b>(050927)</b>                                                                           |
| ECB #                   | Subgroup<br><b>SPIT 2</b> | Parent context<br><b>TP068</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                                                     |
|--|--|-----------------|--|--|-----------------------------------------------------|
|  |  | <b>(050100)</b> |  |  | Same as context <input checked="" type="checkbox"/> |
|  |  | <b>(050927)</b> |  |  | Cuts context <input checked="" type="checkbox"/>    |
|  |  |                 |  |  | Cut by context <input checked="" type="checkbox"/>  |

### CUT

(if you are using this section score out section **FILL/DEPOSIT** below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |               |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          |               | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate sloping<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* |              | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                                        | <b>Depth</b> | <b>Diameter</b>                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |               |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section **CUT** above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                           |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input checked="" type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                          | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b>                                                                                                                                                                      |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                           |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                           |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                             | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                                 | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### CROSS REFERENCE

|                        |                       |                             |                                                                                                                            |
|------------------------|-----------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>/</b> | Finds nos<br><b>/</b> | Photo nos<br><b>05D0670</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|------------------------|-----------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☐ use ☐ disuse ☒

|            |                |
|------------|----------------|
| Date       | <b>31/8/17</b> |
| Initials   | <b>DH</b>      |
| Checked by | <b>J.B.B.</b>  |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked "overleaf")

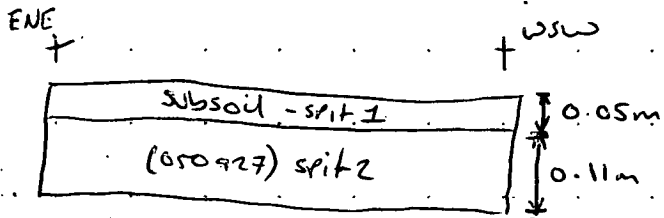
Grey clay silt layer, part of the dark earth deposit, whilst digging it was clear this deposit had been waterlogged at some point.

Upper 5-6 cm of this test pit was removing the remnants of iron rich subsoil.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



# MOLA HEADLAND INFRASTRUCTURE



TP066

## CONTEXT SHEET

|                         |                           |                             |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEAS</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>(050928)</b>                                                                                      |
| ECB #<br>—              | Subgroup<br>—             | Parent context<br>—         | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                   |
|--|--|----------|--|--|-------------------|
|  |  | (050002) |  |  | Same as context — |
|  |  | (050928) |  |  | Cuts context —    |
|  |  |          |  |  | Cut by context —  |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  | <b>Sides</b><br><input type="checkbox"/> vertical <input type="checkbox"/> steep <input type="checkbox"/> moderate <input type="checkbox"/> gentle <input type="checkbox"/> stepped <input type="checkbox"/> undercutting <input type="checkbox"/> complex* |  | <b>Base</b><br><input type="checkbox"/> flat <input type="checkbox"/> concave <input type="checkbox"/> v-shaped <input type="checkbox"/> sloping <input type="checkbox"/> uneven <input type="checkbox"/> complex* |  | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br><input type="checkbox"/> N-S <input type="checkbox"/> E-W <input type="checkbox"/> NE-SW <input type="checkbox"/> NW-SE<br>N                                                                                                                                           |  | <b>Dimensions</b><br>in metres                                                                                                                                                                                                                              |  | <b>Length</b> <b>Width</b> <b>Depth</b> <b>Diameter</b>                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                                                                                                                                                                                                                                         |           |                                                                                                                                                                                                                                                                                                                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |              |       |          |                  |          |                |                 |              |       |                  |                  |              |                |                 |       |       |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------|----------|------------------|----------|----------------|-----------------|--------------|-------|------------------|------------------|--------------|----------------|-----------------|-------|-------|------------------|---------|--------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <b>Compaction</b><br><input checked="" type="checkbox"/> compact <input type="checkbox"/> moderately compact <input type="checkbox"/> loose <input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                          |       | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/> grey <input type="checkbox"/> orange <input type="checkbox"/> yellow <input type="checkbox"/> reddish <input type="checkbox"/> red <input type="checkbox"/> blueish <input type="checkbox"/> blue |           | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/> silty <input checked="" type="checkbox"/> silt <input type="checkbox"/> sandy <input type="checkbox"/> sand <input type="checkbox"/> gravelly <input type="checkbox"/> gravel <input type="checkbox"/> peaty <input type="checkbox"/> peat |                | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |              |       |          |                  |          |                |                 |              |       |                  |                  |              |                |                 |       |       |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Thickness</b><br>0.1 m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                           |           | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |              |       |          |                  |          |                |                 |              |       |                  |                  |              |                |                 |       |       |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |                                                                                                                                                                                                                                                                                                                                                                                                                                         |           |                                                                                                                                                                                                                                                                                                                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |              |       |          |                  |          |                |                 |              |       |                  |                  |              |                |                 |       |       |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> |       |                                                                                                                                                                                                                                                                                                                                                                                                                                         |           |                                                                                                                                                                                                                                                                                                                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | stones*      | chalk | iron pan | manganese        | charcoal | plant remains* | wood            | marine shell | bone* | pot              | fired clay / CBM | CTP          | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | chalk | iron pan                                                                                                                                                                                                                                                                                                                                                                                                                                | manganese | charcoal                                                                                                                                                                                                                                                                                                                                  | plant remains* | wood                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | marine shell | bone* | pot      | fired clay / CBM | CTP      | mortar/plaster | leather/textile | glass        | metal | industrial waste | lithics          | coarse stone |                |                 |       |       |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                                                                                                                                                                                                                                         |           |                                                                                                                                                                                                                                                                                                                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |              |       |          |                  |          |                |                 |              |       |                  |                  |              |                |                 |       |       |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

### CROSS REFERENCE

|                 |                |                             |                                                                                                                            |
|-----------------|----------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>— | Finds nos<br>— | Photo nos<br><b>0500669</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|-----------------|----------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☐ use ☒ disuse ☐

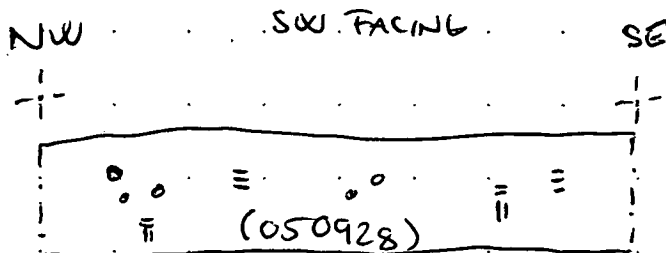
|            |                 |
|------------|-----------------|
| Date       | <b>30/08/17</b> |
| Initials   | <b>P.T.</b>     |
| Checked by | <b>J.B.B.</b>   |

This form is incomplete if fields marked with \* are empty. P!O for additional information (and describing all items marked with \*) and sketches.

(050928) IS A DARK DEPOSITION OF AN OCCUPATION LAYER, POSSIBLY ROMAN. FRAGMENTED POTTERY AND BONES HAVE BEEN FOUND, ALSO SOME CBM HAVE BEEN RECOVERED.

Refer to context

SKETCHES  
(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



Key: ○ - GRAVEL  
≡ - CLAY  
|| - SILT

# MOLA HEADLAND INFRASTRUCTURE



TP 064

## CONTEXT SHEET

|                         |                            |                                   |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>1</b>       | Context number<br><b>(050929)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>(050929)</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(050002)</b> |  |  | Same as context |
|  |  | <b>(050929)</b> |  |  | Cuts context    |
|  |  |                 |  |  | Cut by context  |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |                 |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                                                                                                       |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                 | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input checked="" type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input checked="" type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                          | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input checked="" type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b><br><b>0.21</b>                                                                                                                                                       |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                             | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                      | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains*           | wood                     | marine shell             | bone*                               | pot                                 | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### CROSS REFERENCE

|            |                                                                       |                              |                                                                                                                            |
|------------|-----------------------------------------------------------------------|------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos<br>F55896<br>F55897<br>F55898<br>F55899<br>F55900<br>F55901 | Photo nos<br><b>0600 667</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|------------|-----------------------------------------------------------------------|------------------------------|----------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☐ use ☒ disuse ☐

Date **31/8/17**

Initials **SMG**

Checked by **L.B.B.**

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

Sieve finds

# ADDITIONAL INFORMATION

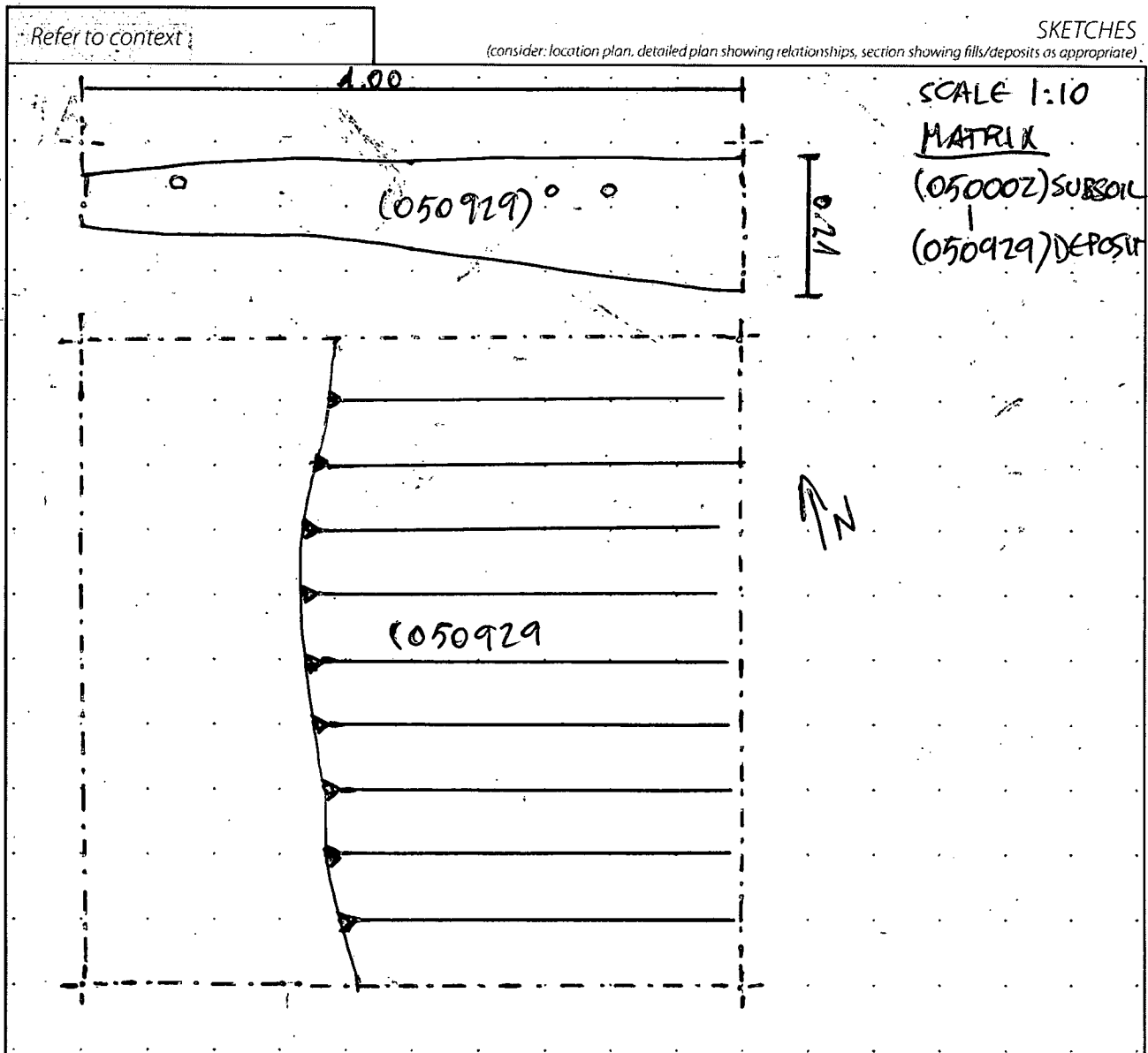
(any further details that may be important for understanding the context, including items marked \* overleaf)

This context (050929) is a deposit, mid~~le~~ grey clay and a bit sandy. This deposit has ~~the~~ colour brownish and orangeish too. This deposit has moderate inclusions of stones (silex stones). In this deposit appear pottery bases and CBH. The pottery are very round and ~~eroded~~ eroded. The pottery ~~are~~ is Iron Roman and Saxo Age. I think that this deposit is colluvial layer.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)





# MOLA HEADLAND INFRASTRUCTURE



TP 071

## CONTEXT SHEET

|                         |                           |                             |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEAS</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>(050930)</b>                                                                                      |
| ECB #<br><b>-</b>       | Subgroup<br><b>-</b>      | Parent context<br><b>-</b>  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                     |                |  |                          |
|--|--|---------------------|----------------|--|--------------------------|
|  |  | <b>(050002)</b>     | <b>Subsoil</b> |  | Same as context <b>-</b> |
|  |  | <b>(050930)</b>     |                |  | Cuts context <b>-</b>    |
|  |  | <b>NOT RECORDED</b> |                |  | Cut by context <b>-</b>  |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |               |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          |               | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* |              | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                                | <b>Depth</b> | <b>Diameter</b>                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |               |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <del>           (This section is crossed out with a large diagonal line)         </del>                                                                                                                                                                                                      |               |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                            |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------|--------------|-------|-----|------------------|-----|----------------|-----------------|-------|-------|------------------|---------|--------------|
| <b>Compaction</b><br><input checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |         | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |          | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat |          | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Thickness</b><br><b>0.14</b>                                                                                                                                                       |         | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |          | other* <input type="checkbox"/>                                                                                                                                                                                                                                            |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                            |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| frequency                                                                                                                                                                             | stones* | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan | manganese                                                                                                                                                                                                                                                                  | charcoal |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains* | wood | marine shell | bone* | pot | fired clay / CBM | CTP | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone |
| bulk find                                                                                                                                                                             |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                            |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |

### CROSS REFERENCE

|                             |                                                              |                             |                                                                                                                            |
|-----------------------------|--------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S05102</b> | Finds nos<br><b>F55852</b><br><b>F55854</b><br><b>F55887</b> | Photo nos<br><b>0500677</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|-----------------------------|--------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                |
|--------------------------------------------------------------------------------------------------------------------------------|
| Basic process<br>construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
|--------------------------------------------------------------------------------------------------------------------------------|

|                               |
|-------------------------------|
| Date<br><b>01/09/17</b>       |
| Initials<br><b>MG</b>         |
| Checked by<br><b>L. B. B.</b> |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

sieve find

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

DARK EARTH DEPOSIT, EXCAVATED AS PART OF TEST PIT 071, TEAS -1.

DEPOSIT IS MIXED WITH SUBSOIL AND VERY COMPACT (~~PARTLY~~ <sup>BECAUSE OF</sup> PARTIALLY WEATHERED CONDITIONS) SILTY CLAY.

THE LAYER OF SIFT CLAY/SILT BENEATH, RICH IN CHARCOAL IS AT TIMES HARD TO DISTINGUISH AND ~~PART~~ THE DEPOSIT WAS SOMEWHAT OVERLAP.

FROM FINDS, TOPOLIM PRODUCED POT, BONE, IRON SLAG AND EVEN FLINT FINDS. BOTTOM 0.20 M ~~PRODUCED~~ PRODUCED BONE AND POT FINDS, AS WELL AS TWO METAL FINDS, A NAIL F55852 AND AN UNKNOWN IRON TRIANGULAR OBJECT F55854.

NOTE: SPIT 2 FINDS (DEPTH OF 0.10-0.20) WERE PARTICULARLY RICH IN THE DEPTH WHERE (050930) AND DEPOSIT BELOW IT MIX.

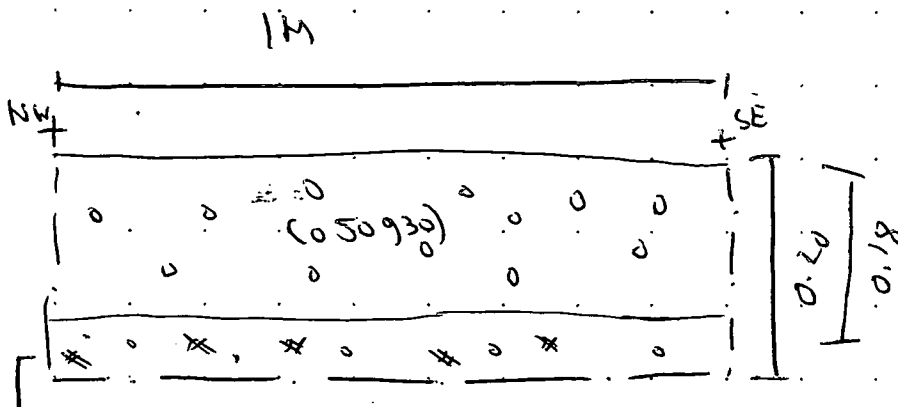
IN PLAN, NO VARIATION COULD BE OBSERVED.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

SOUTH WEST FACING SECTION:



LAYER  
BENEATH  
(050930)  
NOT RECORDED

\* - CHARCOAL  
o - STONE



|                         |                            |                             |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>-</b> | Context number<br><b>(050931)</b>                                                                                      |
| ECB #<br><b>-</b>       | Subgroup<br><b>-</b>       | Parent context<br><b>-</b>  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

STRATIGRAPHIC MATRIX

STRATIGRAPHY

|  |  |          |  |  |                          |
|--|--|----------|--|--|--------------------------|
|  |  | (050002) |  |  | Same as context <b>-</b> |
|  |  | (050931) |  |  | Cuts context <b>-</b>    |
|  |  |          |  |  | Cut by context <b>-</b>  |

**CUT**

(if you are using this section score out section **FILL/DEPOSIT** below)

DESCRIPTION

INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          | <b>Sides</b><br>2 <input type="checkbox"/> vertical<br>2 <input type="checkbox"/> steep<br>2 <input type="checkbox"/> moderate<br>2 <input type="checkbox"/> gentle<br>2 <input type="checkbox"/> stepped<br>2 <input type="checkbox"/> undercutting<br>2 <input type="checkbox"/> complex* | <b>Base</b><br>1 <input type="checkbox"/> flat<br>1 <input type="checkbox"/> concave<br>1 <input type="checkbox"/> v-shaped<br>1 <input type="checkbox"/> sloping<br>1 <input type="checkbox"/> uneven<br>1 <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

**FILL/DEPOSIT**

(if you are using this section score out section **CUT** above)

DESCRIPTION

INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|----------------|-----------|--------------|----------------|------|------------------|-------|----------------|------------------|-------|----------------|------------------|---------|--------------|------------------|---------|--------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input checked="" type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown<br>greyish <input type="checkbox"/> <input type="checkbox"/> grey<br>orangeish <input checked="" type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> <input type="checkbox"/> red<br>blueish <input type="checkbox"/> <input type="checkbox"/> blue<br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> <input type="checkbox"/> silt<br>sandy <input type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat<br>other* <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Thickness</b><br><b>0.17 m</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | stones*   | chalk    | iron pan       | manganese | charcoal     | plant remains* | wood | marine shell     | bone* | pot            | fired clay / CBM | CTP   | mortar/plaster | leather/textile  | glass   | metal        | industrial waste | lithics | coarse stone |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | iron pan                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | manganese | charcoal | plant remains* | wood      | marine shell | bone*          | pot  | fired clay / CBM | CTP   | mortar/plaster | leather/textile  | glass | metal          | industrial waste | lithics | coarse stone |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| frequency<br>bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

CROSS REFERENCE

|                             |                             |                             |                                                                                                                            |
|-----------------------------|-----------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S05104</b> | Finds nos<br><b>F=55924</b> | Photo nos<br><b>0500676</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|-----------------------------|-----------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|

Basic process

construction ☐ use ☒ disuse ☐

Date **01/09/17**

Initials **P.T.**

Checked by **L.B.A.**

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \*overleaf)

(050931) IS AN ORANGEISH-BROWN COLOUR, SLIGHTLY GRAVELLY DEPOSITION OF AN OCCUPATIONAL LAYER.

SEVERAL TYPES OF FRAGMENTED POTTERY HAVE BEEN FOUND HERE, POSSIBLY ROMAN WORK.

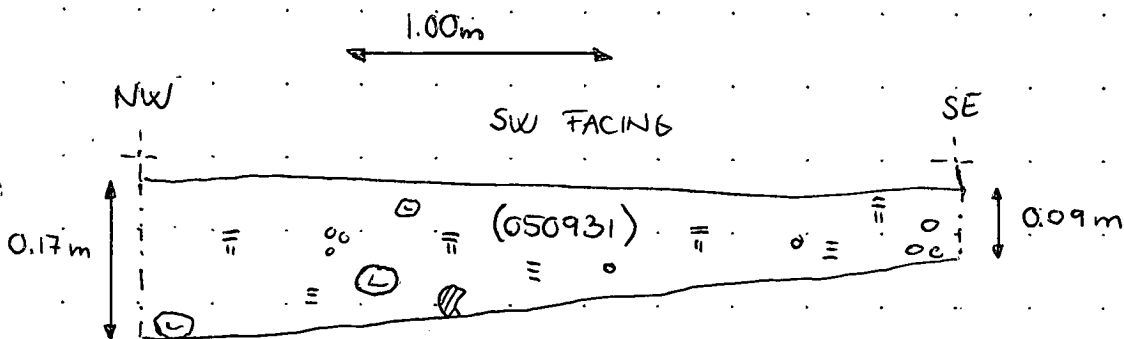
SOME ANIMAL BONE FRAGMENTS, CBM AND A METAL SLUG HAVE ALSO BEEN FOUND HERE.

IT IS A RELATIVELY SHALLOW DEPOSITION HERE. ITS DEEPEST POINT IS AROUND 0.17 m, HOWEVER IN GENERAL IT IS LESS THAN 0.1 m DEEP.

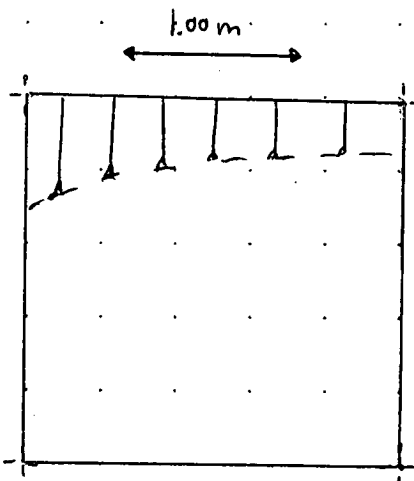
Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



KEY:   
 ○ - STONE   
 ⊗ - GRAVEL   
 ≡ - CLAY   
 ≡ - SILT   
 ⊗ - A. BONE



|                         |                            |                             |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>050932</b>                                                                                        |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>       | Parent context<br><b>—</b>  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |        |  |  |                   |
|--|--|--------|--|--|-------------------|
|  |  | 050007 |  |  | Same as context — |
|  |  | 050932 |  |  | Cuts context —    |
|  |  |        |  |  | Cut by context —  |

(if you are using this section score out section **FILL/DEPOSIT** below)

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE | <b>Sides</b><br> <input type="checkbox"/> vertical<br> <input type="checkbox"/> steep<br> <input type="checkbox"/> moderate<br> <input type="checkbox"/> gentle<br> <input type="checkbox"/> stepped<br> <input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br> <input type="checkbox"/> flat<br> <input type="checkbox"/> concave<br> <input type="checkbox"/> v-shaped<br> <input type="checkbox"/> sloping<br> <input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |

**FILL/DEPOSIT**

(if you are using this section score out section **CUT** above)

## DESCRIPTION

### INTERPRETATION

[illegible]

## CROSS REFERENCE

|                      |           |                      |                                                                                                                            |
|----------------------|-----------|----------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>S05105 | Finds nos | Photo nos<br>0500691 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|----------------------|-----------|----------------------|----------------------------------------------------------------------------------------------------------------------------|

Basic process  
construction ☐ use ☐ disuse ☒

Date 4/9/17

Initials BK

Checked by 2.8.5

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked "overleaf")

1m x 1m TEST PIT 073 THROUGH Dark  
occupation Layer

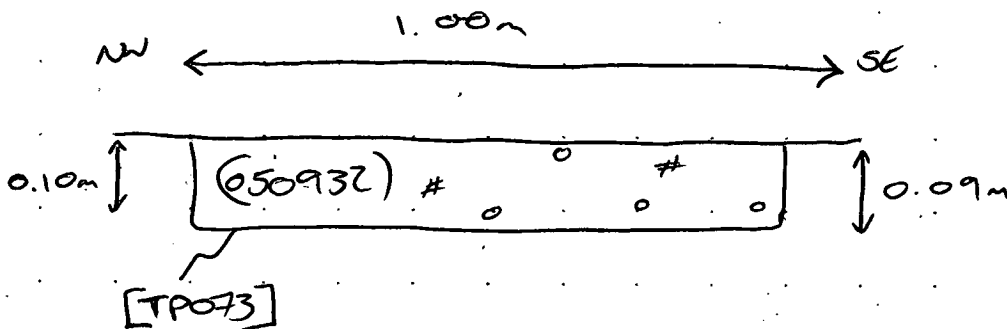
TEST PIT included deposit (050932) which is  
composed of clay silt with mod. small  
angular stones, occ. chalk flecks & occ.  
charcoal flecks.

Finds included occ. Pottery Frag & occ.  
A BONE FRAG.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



|                  |                     |                            |                                                                                                                        |
|------------------|---------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA 5 | Sub-area/Trench<br>1       | Context number<br>(050933)                                                                                             |
| ECB #            | Subgroup<br>/       | Parent context<br>(050933) | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (050000) |  |  | Same as context |
|  |  | (050933) |  |  | Cuts context    |
|  |  |          |  |  | Cut by context  |

(if you are using this section score out section **FILL/DEPOSIT** below)

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                     | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="margin-left: 10px;">           sloping         </div> </div> |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                 |

(if you are using this section score out section **CUT** above)

### INTERPRETATION

| <i><b>Compaction</b></i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                    | <i><b>Colour</b></i>                                                                                                                  |                                                                                                                                                                                                                                                 | <i><b>Composition</b></i>                                                                                                                                                                                         |                                                                                                                                                                                       |                                                                                                                                                                                |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> loose<br><input type="checkbox"/> friable | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> | brownish <input checked="" type="checkbox"/><br>greyish <input type="checkbox"/><br>orangeish <input checked="" type="checkbox"/><br>yellowish <input type="checkbox"/><br>reddish <input type="checkbox"/><br>blueish <input type="checkbox"/> | brown <input type="checkbox"/><br>grey <input checked="" type="checkbox"/><br>orange <input type="checkbox"/><br>yellow <input type="checkbox"/><br>red <input type="checkbox"/><br>blue <input type="checkbox"/> | clayey <input type="checkbox"/><br>silty <input type="checkbox"/><br>sandy <input checked="" type="checkbox"/><br>gravelly <input type="checkbox"/><br>peaty <input type="checkbox"/> | <input checked="" type="checkbox"/> clay<br><input type="checkbox"/> silt<br><input type="checkbox"/> sand<br><input type="checkbox"/> gravel<br><input type="checkbox"/> peat |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <i><b>Thickness</b></i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                    |                                                                                                                                       |                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                   |                                                                                                                                                                                       |                                                                                                                                                                                |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>0.70</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                    | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                         |                                                                                                                                                                                                                                                 | other* <input type="checkbox"/>                                                                                                                                                                                   |                                                                                                                                                                                       |                                                                                                                                                                                |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <i><b>Inclusions</b></i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                    |                                                                                                                                       |                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                   |                                                                                                                                                                                       |                                                                                                                                                                                |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | stones*                                                            | chalk                                                                                                                                 | iron pan                                                                                                                                                                                                                                        | manganese                                                                                                                                                                                                         | charcoal                                                                                                                                                                              | plant remains*                                                                                                                                                                 | wood                     | marine shell             | bone*                               | pot.                                | fired clay / CBM                    | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |                          |
| frequency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | F                                                                  | O                                                                                                                                     |                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                   | O                                                                                                                                                                                     |                                                                                                                                                                                |                          |                          | O                                   | M                                   | O                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/>                                           | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/>                                                                                                                                                                                                                        | <input type="checkbox"/>                                                                                                                                                                                          | <input type="checkbox"/>                                                                                                                                                              | <input type="checkbox"/>                                                                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <div style="float: right;">topsoil<input type="checkbox"/><br/>subsoil<input type="checkbox"/><br/>geological subsoil<input type="checkbox"/><br/>remnant topsoil<input type="checkbox"/><br/>surface<input type="checkbox"/><br/>occupation layer<input checked="" type="checkbox"/><br/>dumped layer<input type="checkbox"/><br/>deliberate backfill<input type="checkbox"/><br/>destruction debris<input type="checkbox"/><br/>bedding layer<input type="checkbox"/><br/>natural infilling<input type="checkbox"/><br/>colluvial layer<input type="checkbox"/><br/>in situ burning<input type="checkbox"/><br/>post-pipe<input type="checkbox"/><br/>packing<input type="checkbox"/><br/>cremation<input type="checkbox"/><br/>other fill/deposit (describe below)<input type="checkbox"/></div> |                                                                    |                                                                                                                                       |                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                   |                                                                                                                                                                                       |                                                                                                                                                                                |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |

### Basic process

|            |           |                |                                                                                                |                                                                                                                                        |
|------------|-----------|----------------|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos      | Drawing nos                                                                                    | <input type="checkbox"/> construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
|            | F-55862   | 0500688 (join) | Drawn by:                                                                                      | Date 1-09-17                                                                                                                           |
|            | F-55921   | 0500690        | plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | Initials SMG                                                                                                                           |
|            |           |                |                                                                                                | Checked by                                                                                                                             |

# ADDITIONAL INFORMATION

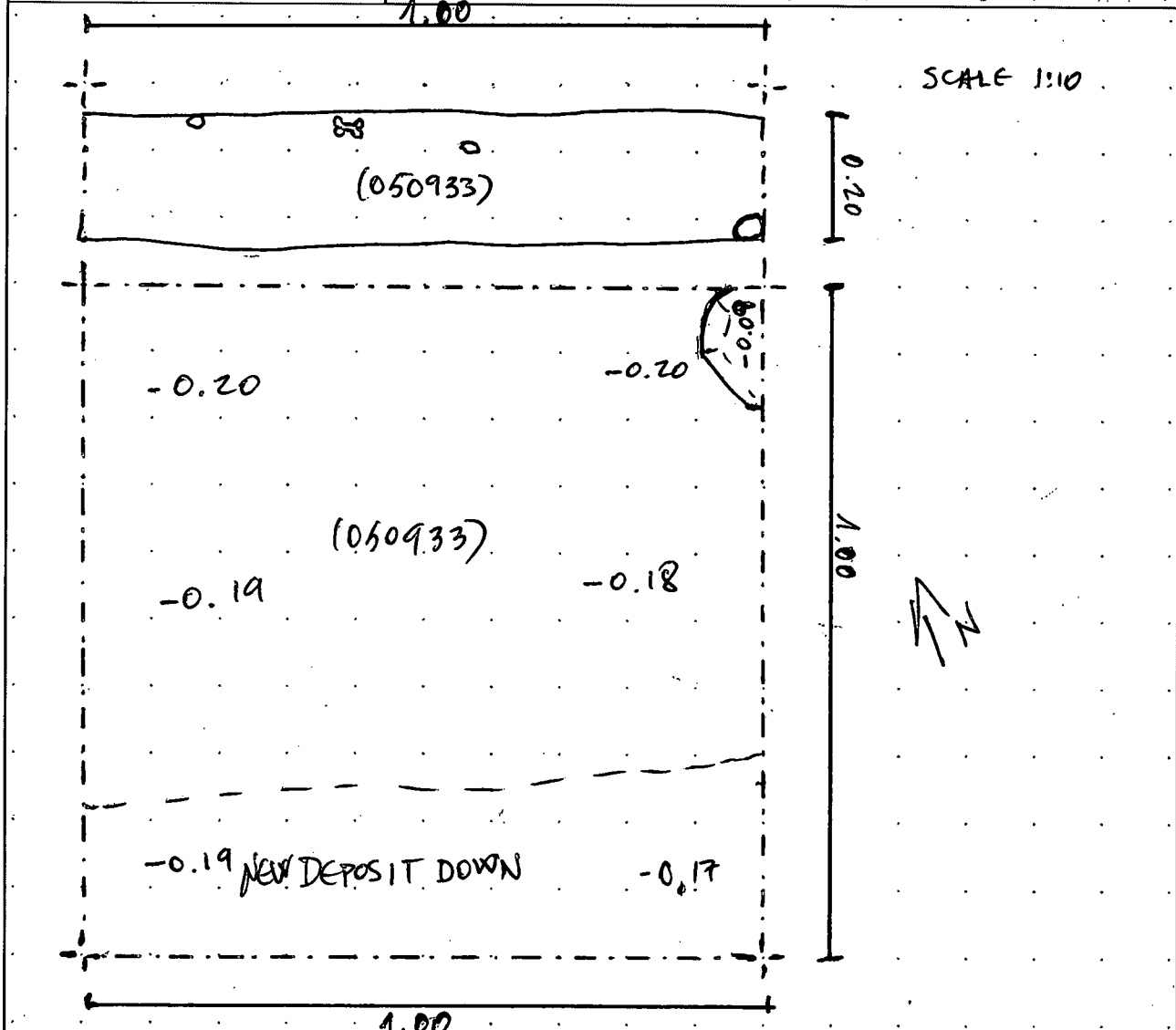
(any further details that may be important for understanding the context, including items marked "overleaf")

This context (050933) is a deposit, middle grey and brownish-orange clay and a bit sandy. A middle sandstone appears at the northeast corner, which I draw on the plan sketch. Silx stones and some chalk appears in this deposit. The bones are of animals and the pottery is mixed, being Iron-Roman-Saxo Ages. Under the context (050933) a light brown clay deposit with more gravel appears. It is possible that this deposit (050933) is a ~~colloidal~~ colloidal layer.

Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)





|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A 14      | TEAS       | 1               | (050934)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           | —          | (050934)        | cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                   |                                                                                   |                                                                                   |                                                                                    |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------|-----------------|
|                                                                                                                                                                                                                                                                                                                                           |  |  |  |  | Same as context |
|      |                                                                                   |                                                                                   |                                                                                   |                                                                                    | Cuts context    |
|                                                                                                                                                                                                                                                                                                                                           |  |  |  |  | Cut by context  |

(if you are using this section score out section **FILL/DEPOSIT** below)

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE | <b>Sides</b><br> <input type="checkbox"/> vertical<br> <input type="checkbox"/> steep<br> <input type="checkbox"/> moderate<br> <input type="checkbox"/> gentle<br> <input type="checkbox"/> stepped<br> <input type="checkbox"/> undercutting<br><input type="checkbox"/> complex | <b>Base</b><br> <input type="checkbox"/> flat<br> <input type="checkbox"/> concave<br> <input type="checkbox"/> y-shaped<br> <input type="checkbox"/> sloping<br> <input type="checkbox"/> uneven<br><input type="checkbox"/> complex* | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>Width</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>Depth</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

(if you are using this section score out section **CUT** above)

## DESCRIPTION

### INTERPRETATION

| <b>Compaction</b>                                                                                                                                                |                          |                          |                          |                          |                          | <b>Colour</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                          |                                     |                                     |                          |                          | <b>Composition</b>                                                                                                                                                                                                                                                                                                                                       |                          |                          |                          |                          |                          |                          |                          | <b>Other*</b> |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---------------|
| <input checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          |                          |                          |                          |                          | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input checked="" type="checkbox"/><br><br><div style="display: flex; justify-content: space-between;"> <span>brownish <input checked="" type="checkbox"/></span> <span><input type="checkbox"/> brown</span> </div> <div style="display: flex; justify-content: space-between;"> <span>greyish <input type="checkbox"/></span> <span><input checked="" type="checkbox"/> grey</span> </div> <div style="display: flex; justify-content: space-between;"> <span>orangeish <input type="checkbox"/></span> <span><input type="checkbox"/> orange</span> </div> <div style="display: flex; justify-content: space-between;"> <span>yellowish <input type="checkbox"/></span> <span><input type="checkbox"/> yellow</span> </div> <div style="display: flex; justify-content: space-between;"> <span>reddish <input type="checkbox"/></span> <span><input type="checkbox"/> red</span> </div> <div style="display: flex; justify-content: space-between;"> <span>blueish <input type="checkbox"/></span> <span><input type="checkbox"/> blue</span> </div> |                          |                          |                                     |                                     |                          |                          | clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> <input type="checkbox"/> silt<br>sandy <input type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat |                          |                          |                          |                          |                          |                          |                          |               |
| Thickness                                                                                                                                                        |                          |                          |                          |                          |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                          |                          |                                     |                                     |                          |                          |                                                                                                                                                                                                                                                                                                                                                          |                          |                          |                          |                          |                          |                          |                          |               |
| 0.2m                                                                                                                                                             |                          |                          |                          |                          |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                          |                                     |                                     |                          |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                          |                          |                          |                          |                          |                          |                          |                          |               |
| <b>Inclusions</b>                                                                                                                                                |                          |                          |                          |                          |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                          |                          |                                     |                                     |                          |                          |                                                                                                                                                                                                                                                                                                                                                          |                          |                          |                          |                          |                          |                          |                          |               |
| use the following:<br>O : occasional<br>M : moderate<br>F : frequent                                                                                             | stones*                  | chalk                    | iron pan                 | manganese                | charcoal                 | plant remains*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | wood                     | marine shell             | bone*                               | pot                                 | fired clay / CBM         | CTP                      | mortar/plaster                                                                                                                                                                                                                                                                                                                                           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |                          |               |
| frequency                                                                                                                                                        | O                        |                          |                          |                          | F                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                          |                          | M                                   | I                                   |                          |                          |                                                                                                                                                                                                                                                                                                                                                          |                          |                          |                          |                          |                          |                          |                          |               |
| bulk find                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |               |

topsoil ☐  
subsoil ☐  
geological subsoil ☐  
remnant topsoil ☐  
surface ☐  
occupation layer ☒  
dumped layer ☐  
deliberate backfill ☐  
destruction debris ☐  
bedding layer ☐  
natural infilling ☐  
colluvial layer ☐  
in situ burning ☐  
post-pipe ☐  
packing ☐  
cremation ☐  
other fill/deposit (describe below)

### CROSS REFERENCE

|                      |                                                   |                      |                                                                                                                            |
|----------------------|---------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>S05106 | Finds nos<br>F55861<br>F55863<br>F55864<br>F55865 | Photo nos<br>0500679 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|----------------------|---------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|

|                                       |                                                                         |
|---------------------------------------|-------------------------------------------------------------------------|
| Basic process                         |                                                                         |
| construction <input type="checkbox"/> | use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date                                  | 1/9/17                                                                  |
| Initials                              | R.D.C                                                                   |
| Checked by                            | J.B.B.                                                                  |

sieve Finds.

This form is incomplete if fields marked with  are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

TEST PIT 075 in the dark earth spread.

~~MODERATE~~

COMPACT occupation layer, dark mottled brownish grey colour with a ~~moderate~~ silt-clay composition.

Moderate inclusions of charcoal (small pieces), presence of moderate pottery and ~~moderate~~ occasional bones of animals. Occasional gravels and small stones.

SPLIT 1: 10 cm <sup>max</sup> depth / 12 Pot. sherds / 11 pieces of animal bones / 14 Buckets for sieving

SPLIT 2: 10 cm <sup>max</sup> depth / 4 Pot. sherds / 11 buckets for sieving

1 bucket environmental sample (S05106)

In Total: 16 Pot. sherds / 11 pieces of animal bones / 25 buckets sieving

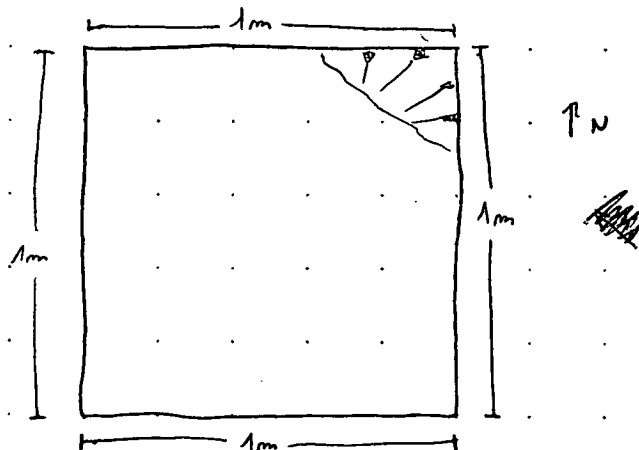
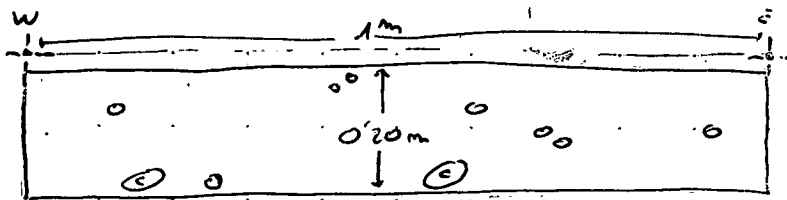
1 bucket environmental

Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

N.T.S. TP 075 (050934)



TP 076

|                  |                    |                            |                                                                                                                        |
|------------------|--------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A16 | Area/Field<br>TEA5 | Sub-area/Trench<br>1       | Context number<br>(050935)                                                                                             |
| ECB #            | Subgroup           | Parent context<br>(050935) | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |                                                                                   |  |  |                 |
|--|--|-----------------------------------------------------------------------------------|--|--|-----------------|
|  |  | 050100                                                                            |  |  | Same as context |
|  |  | (050935)                                                                          |  |  | Cuts context ,  |
|  |  |  |  |  | Cut by context  |

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                                                                                                                                                                                                                                   | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                    |  | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="font-size: 2em; margin-right: 10px;">}</div> <div>sloping</div> </div> |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> y-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

### INTERPRETATION

[illegible]

### Basic process

|                     |                    |                                 |                  |                                                                                                                                                                                                                              |                                                    |
|---------------------|--------------------|---------------------------------|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|
| Sample nos<br><br>/ | Finds nos<br><br>/ | Photo nos<br>0500680<br>0500681 | Drawing nos<br>/ | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/><br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | Date 4/09/17<br>Initials AC<br>Checked by J. A. A. |
|---------------------|--------------------|---------------------------------|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|

*This form is incomplete if fields marked with  are empty. PTO for additional information (and describing all items marked with \*) and sketches.*

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

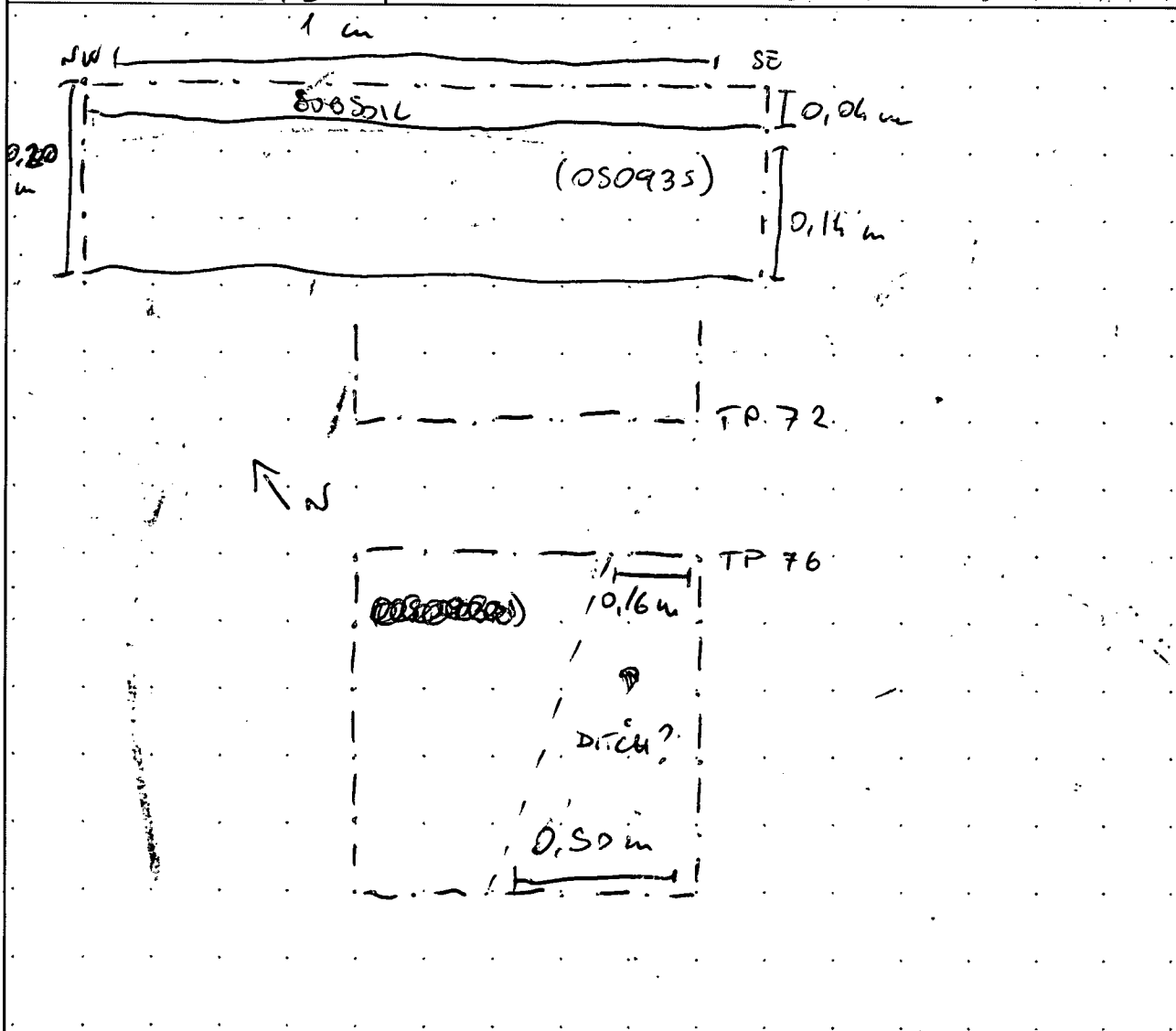
THE DEPOSIT IS QUITE DARK BUT LIKE IN THE OTHERS TEST PITS OF THE ~~SOIL~~ SOUTH AREA IS LESS DARK THAN THE NORTH AREA. SOME SUBSOIL SPARED (0,06 m). FREQUENT PRESENCE OF FRAGMENTS OF NATURAL FLINTS (AS USUAL IN THIS DEPOSIT). MORE POTTERY IN THE SPIT 2 (ROMAN POTTERY). A ~~POTTERY~~ POTSHARD OF A MORTAR-BIT. UNDERNEATH THE DEPOSIT THERE IS A DIFFERENT LAYER (QUITE SIMILAR BUT MORE SANDY AND WITH FREQUENT CHALK) AND IN THE EAST PART OF THE PIT THERE IS PROBABLY PART OF A FILL (DITCH?) MADE OF ALMOST PURE CLAY ~~AND~~ LIGHTER AND MORE BROWNISH (BECAUSE OF THE PRESENCE OF THE SUBSOIL IT WASN'T IMMEDIATELY VISIBLE AND WAS IN PART REMOVED AT THE SAME LEVEL WITH THE DEPOSIT (OS0935)).

Refer to context

NTS

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



# MOLA HEADLAND INFRASTRUCTURE



TP 106

## CONTEXT SHEET

|                         |                            |                             |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>(050936)</b>                                                                                      |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>       | Parent context<br><b>—</b>  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                     |                |  |                          |
|--|--|---------------------|----------------|--|--------------------------|
|  |  | <b>(050002)</b>     | <b>Subsult</b> |  | Same as context <b>—</b> |
|  |  | <b>(050936)</b>     |                |  | Cuts context <b>—</b>    |
|  |  | <b>NOT RECORDED</b> |                |  | Cut by context <b>—</b>  |

### CUT

(if you are using this section score out section **FILL/DEPOSIT** below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                 |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          |  | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input type="checkbox"/> steep<br>L <input type="checkbox"/> moderate sloping<br>L <input type="checkbox"/> gentle<br>L <input type="checkbox"/> stepped<br>L <input type="checkbox"/> undercutting<br>L <input type="checkbox"/> complex* |              | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>S <input type="checkbox"/> sloping<br>U <input type="checkbox"/> uneven<br>C <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of (tick all that apply)</b><br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

### FILL/DEPOSIT

(if you are using this section score out section **CUT** above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------|--------------|-------|-----|------------------|-----|----------------|-----------------|-------|-------|------------------|---------|--------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input checked="" type="checkbox"/> friable |         | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |          | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |          | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Thickness</b><br>0-10 *                                                                                                                                                                       |         | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                           |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| frequency                                                                                                                                                                                        | stones* | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan | manganese                                                                                                                                                                                                                                                                                                                                                                      | charcoal |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains* | wood | marine shell | bone* | pot | fired clay / CBM | CTP | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone |
| bulk find                                                                                                                                                                                        |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |

### CROSS REFERENCE

|                                                                                                             |                            |                             |                         |
|-------------------------------------------------------------------------------------------------------------|----------------------------|-----------------------------|-------------------------|
| Sample nos<br><b>—</b>                                                                                      | Finds nos<br><b>255891</b> | Photo nos<br><b>0500678</b> | Drawing nos<br><b>—</b> |
| Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |                            |                             |                         |

### Basic process

construction ☐ use ☒ disuse ☐

Date **01/09/17**

Initials **MG**

Checked by **L.B.S.**

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

sieve find

DEPOSIT WAS EXCAVATED AS PART OF TEST PIT 106 IN ~~THE~~ TEA 5.

DEPOSIT WAS ONLY EXCAVATED TO DEPTH OF 0.10M AS ANOTHER DEPOSIT/FILL WAS ENCOUNTERED IN THE SOUTHERN 60% OF THE PLAN. THAT DEPOSIT CONTAINS MORE BROWN COLOURED MUDITE AND A HIGHER FREQUENCY OF ~~GRAVEL~~ GRAVEL STONES THAN (050936).

DEPOSIT (050936) CONTINUES DEEPER ON NORTHERN 30% OF PLAN, BUT ITS DEPTH WAS NOT TESTED. CLOSEST TEST PIT THAT MIGHT OFFER MORE ~~IN~~ INFORMATION IS TP104, IMMEDIATELY NORTH OF IT.  
EAST

RELATIVELY FEW FINDS (ONLY POT AND BONE) WERE RETRIEVED FROM THE EXCAVATED DEPOSIT, INDICATING AN OUTER EDGE OF THE MAIN ROMAN ACTIVITY.

OTHER INCLUSIONS LIKE CHALK, CHIMNEY AND MUD PLY HAVE BEEN VERY OCCASIONAL AND THUS NEGLIGIBLE.

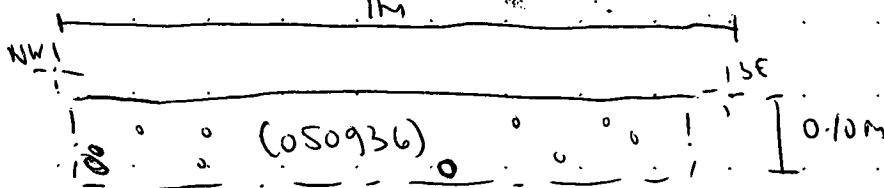
Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

SOUTH ~~WEST~~ WEST FACING SECTION

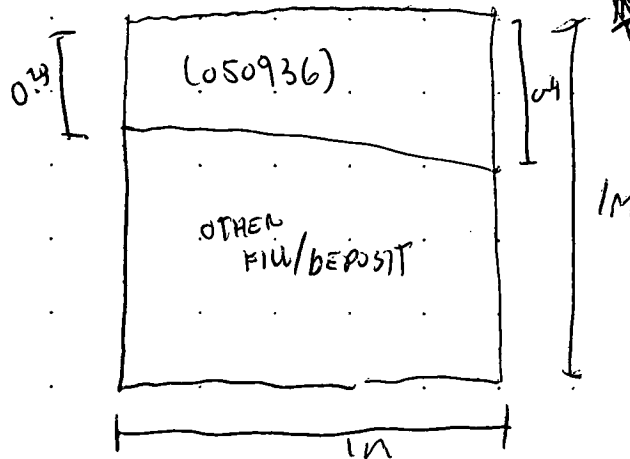
NTS  
=



o - ROCK  
s - STONES

TP  
104

4M



## STRATIGRAPHY

|  |  |                                                                                   |  |  |                 |
|--|--|-----------------------------------------------------------------------------------|--|--|-----------------|
|  |  | (050003)                                                                          |  |  | Same as context |
|  |  | (050937)                                                                          |  |  | Cuts context    |
|  |  |  |  |  | Cut by context  |

(if you are using this section score out section **FILL/DEPOSIT** below)

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                   |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                   |                 | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                    | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">  <input type="checkbox"/> vertical<br/>  <input type="checkbox"/> steep<br/>  <input type="checkbox"/> moderate<br/>  <input type="checkbox"/> gentle<br/>  <input type="checkbox"/> stepped<br/>  <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="font-size: 3em; margin: 0 10px;">}</div> <div>           sloping         </div> </div> |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                   |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

(if you are using this section score out section **CUT** above)

### INTERPRETATION

|                                                                                                                                                                                       |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |           |                                                                                                                                                                                                                                                                                                                                                                                |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------|--------------|-------|-----|------------------|-----|----------------|-----------------|-------|-------|------------------|---------|--------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |       | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown<br>greyish <input type="checkbox"/> <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> <input type="checkbox"/> red<br>blueish <input type="checkbox"/> <input type="checkbox"/> blue |           | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> <input type="checkbox"/> silt<br>sandy <input type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Thickness</b><br>0' 10                                                                                                                                                             |       | black <input checked="" type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |           | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |           |                                                                                                                                                                                                                                                                                                                                                                                |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| stones*                                                                                                                                                                               | chalk | iron pan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | manganese | charcoal                                                                                                                                                                                                                                                                                                                                                                       | plant remains* | wood | marine shell | bone* | pot | fired clay / CBM | CTP | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone |
| frequency                                                                                                                                                                             | O     | O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |           | O                                                                                                                                                                                                                                                                                                                                                                              |                |      |              | M     | O   |                  |     |                |                 |       |       |                  |         |              |
| bulk find                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |           |                                                                                                                                                                                                                                                                                                                                                                                |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |

topsoil ☐  
 subsoil ☐  
 geological subsoil ☐  
 remnant topsoil ☐  
 surface ☐  
 occupation layer ☐  
 dumped layer ☐  
 deliberate backfill ☐  
 destruction debris ☐  
 bedding layer ☐  
 natural infilling ☐  
 colluvial layer ☐  
 in situ burning ☐  
 post-pipe ☐  
 packing ☐  
 cremation ☐

other fill/deposit (describe below) ☒

**Abandonment Layer**

topsoil ☐  
 subsoil ☐  
 geological subsoil ☐  
 remnant topsoil ☐  
 surface ☐  
 occupation layer ☐  
 dumped layer ☐  
 deliberate backfill ☐  
 destruction debris ☐  
 bedding layer ☐  
 natural infilling ☐  
 colluvial layer ☐  
 in situ burning ☐  
 post-pipe ☐  
 packing ☐  
 cremation ☐

other fill/deposit (describe below) ☒

**Abandonment Layer**

### Basic process

|                      |                               |                      |                                                                                                                            |                                                                                                                                                                         |
|----------------------|-------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>505107 | Finds nos<br><del>55916</del> | Photo nos<br>0500687 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/><br>Date 04/09/2017<br>Initials DSK<br>Checked by J. B. B. |
|----------------------|-------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

*This form is incomplete if fields marked with  are empty. PTO for additional information (and describing all items marked with \*) and sketches.*

Sieve / Find.

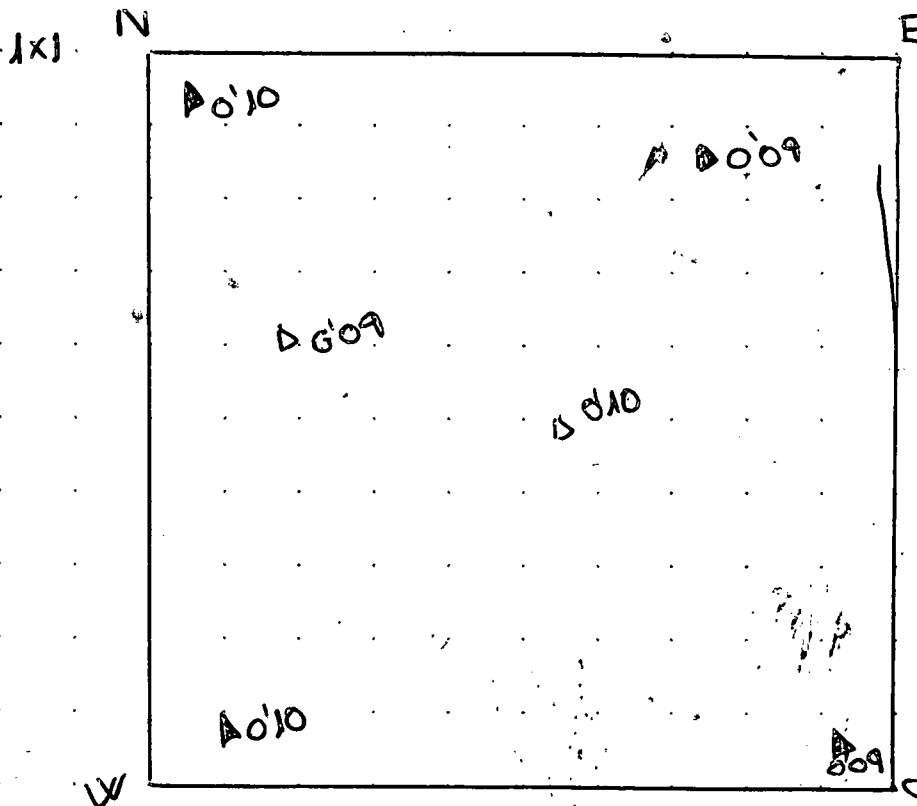
Deposit (050937) where basically only one split (0'10m) has been documented. Regarding its inclusions, only a piece of pottery dated in Roman Period has been found as well as some pieces of bones, thus we think part of the deposit so-called "Dark Earth" has been erased due to some post-depositional processes such as erosion.

According to the aerial photography we're using, this slot (test pit) is just in the limit where the "dark earth" starts to disappear, explaining why we've not been able to document more finds. Likewise, in this point the soil excavated is less "black" and "clay", confirming, in our opinion, that the majority of archaeological evidences we can find in the future, must be situated up the North.

Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



NE SECTION



KEYBOARD



silty-clay



# MOLA HEADLAND INFRASTRUCTURE



TP 100

## CONTEXT SHEET

|                         |                            |                             |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>(050938)</b>                                                                                      |
| ECB #<br><b>-</b>       | Subgroup<br><b>-</b>       | Parent context<br><b>-</b>  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                     |             |  |                          |
|--|--|---------------------|-------------|--|--------------------------|
|  |  | <b>(050002)</b>     | <b>Subs</b> |  | Same as context <b>-</b> |
|  |  | <b>(050938)</b>     |             |  | Cuts context <b>-</b>    |
|  |  | <b>NOT A FLOWED</b> |             |  | Cut by context <b>-</b>  |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                                          | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                 |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>H <input type="checkbox"/> E-W<br>↗ <input type="checkbox"/> NE-SW<br>↘ <input type="checkbox"/> NW-SE<br>N<br>▲                                                                                                                     |  | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>\ <input type="checkbox"/> steep<br>/ <input type="checkbox"/> moderate<br>~ <input type="checkbox"/> gentle<br>~ <input type="checkbox"/> stepped<br>Z <input type="checkbox"/> undercutting<br>[ <input type="checkbox"/> complex* |              | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input checked="" type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>[ <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                                     | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                          | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |
| <b>Thickness</b><br><b>0.08</b>                                                                                                                                                       |                                     | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |
| frequency                                                                                                                                                                             | stones*                             | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                      | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains*           | wood                     | marine shell             | bone*                               | pot                                 | fired clay / CBM                    | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste                    | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input checked="" type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### CROSS REFERENCE

|                                                                                                            |                                                 |                             |                         |
|------------------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------|-------------------------|
| Sample nos<br><b>/</b>                                                                                     | Finds nos<br><b>F- 55922</b><br><b>F- 55923</b> | Photo nos<br><b>0500692</b> | Drawing nos<br><b>/</b> |
| Surveyed<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |                                                 |                             |                         |

|                                                                                                                                |
|--------------------------------------------------------------------------------------------------------------------------------|
| Basic process<br>construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
|--------------------------------------------------------------------------------------------------------------------------------|

|                             |
|-----------------------------|
| Date<br><b>04/09/17</b>     |
| Initials<br><b>mq</b>       |
| Checked by<br><b>L.B.B.</b> |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

DARK EARTH DEPOSIT, EXCAVATED AS PART OF TEST PIT 100.  
DEPOSIT INCLUDES GRAVEL STONES AND OCCASIONAL CHALK PARTICLE. IT IS 0.08M DEEP ON SW FACING SECTION. LOWEST DEPTH IS AROUND 0.03M ON NW FACING SECTION, WHICH IS MORE RESULT OF MACHINE TRUNCATION THAN A CONSIDERABLE CHANGE IN GROUND ELEVATION.

BENEATH DEPOSIT LIES ORANGEISH BROWN GRAVELLY/CHALKY NATURAL LAYER AND UP TO TWO FEATURES OF ARCHAEOLOGICAL IMPORTANCE.

ONE IS A LINEAR FEATURE 20 CM WIDE (POSSIBLE GULLY OR A SMALL RING DITCH) AND OTHER A POTENTIAL POSTHOLE, INFILLED WITH DEPOSIT (050938) OR A VERY SIMILAR KILL.

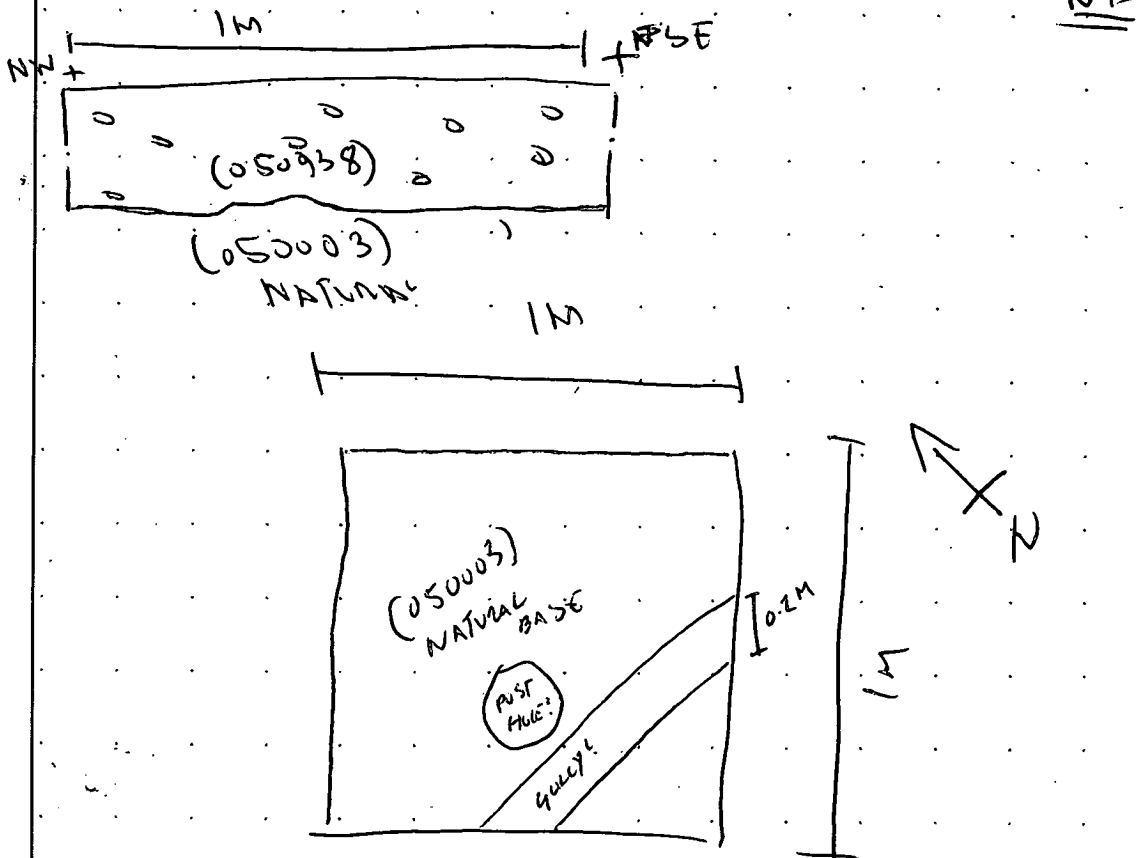
DEPOSIT (050938) ITSELF PROVIDED POT, BONE, LBM AND IRON SLAG FINDS IN RELATIVELY LOW NUMBERS.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

SW FACING SECTION:



|                  |                     |                      |                                                                                                                        |
|------------------|---------------------|----------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA 5 | Sub-area/Trench<br>1 | Context number<br>(050939)                                                                                             |
| ECB #            | Subgroup<br>—       | Parent context<br>—  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (050002) |  |  | Same as context | ✓ |
|  |  | (050939) |  |  | Cuts context    | ✓ |
|  |  |          |  |  | Cut by context  | ✓ |

CUT

(if you are using this section score out section **FILL/DEPOSIT** below)

## DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE | <b>Sides</b><br> <input type="checkbox"/> vertical<br> <input type="checkbox"/> steep<br> <input type="checkbox"/> moderate<br> <input type="checkbox"/> gentle<br> <input type="checkbox"/> stepped<br> <input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br> <input type="checkbox"/> flat<br> <input type="checkbox"/> concave<br> <input type="checkbox"/> v-shaped<br> <input type="checkbox"/> sloping<br> <input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |              |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Width</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>Depth</b> | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              |                 |

**FILL/DEPOSIT**

(if you are using this section score out section CUT above)

## DESCRIPTION

### INTERPRETATION

| Compaction                                                        |         | Colour                                                                                                                                |          | Composition                                  |                                          |                |                                                              |
|-------------------------------------------------------------------|---------|---------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------|------------------------------------------|----------------|--------------------------------------------------------------|
| <input checked="" type="checkbox"/> compact                       |         | light <input checked="" type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> |          | clayey <input type="checkbox"/>              | <input checked="" type="checkbox"/> clay |                | topsoil <input type="checkbox"/>                             |
| <input type="checkbox"/> moderately compact                       |         | brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown                                                           |          | silty <input type="checkbox"/>               | <input type="checkbox"/> silt            |                | subsoil <input type="checkbox"/>                             |
| <input type="checkbox"/> loose                                    |         | greyish <input type="checkbox"/> <input type="checkbox"/> grey                                                                        |          | sandy <input type="checkbox"/>               | <input type="checkbox"/> sand            |                | geological subsoil <input type="checkbox"/>                  |
| <input type="checkbox"/> friable                                  |         | orangeish <input checked="" type="checkbox"/> <input type="checkbox"/> orange                                                         |          | gravelly <input checked="" type="checkbox"/> | <input type="checkbox"/> gravel          |                | remnant topsoil <input type="checkbox"/>                     |
|                                                                   |         | yellowish <input type="checkbox"/> <input type="checkbox"/> yellow                                                                    |          | peaty <input type="checkbox"/>               | <input type="checkbox"/> peat            |                | surface <input type="checkbox"/>                             |
|                                                                   |         | reddish <input type="checkbox"/> <input type="checkbox"/> red                                                                         |          |                                              |                                          |                | occupation layer <input checked="" type="checkbox"/>         |
|                                                                   |         | blueish <input type="checkbox"/> <input type="checkbox"/> blue                                                                        |          |                                              |                                          |                | dumped layer <input type="checkbox"/>                        |
| Thickness                                                         |         | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                         |          | other* <input type="checkbox"/>              |                                          |                | deliberate backfill <input type="checkbox"/>                 |
| 0.09m                                                             |         |                                                                                                                                       |          |                                              |                                          |                | destruction debris <input type="checkbox"/>                  |
| Inclusions                                                        |         |                                                                                                                                       |          |                                              |                                          |                | bedding layer <input type="checkbox"/>                       |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones* | chalk                                                                                                                                 | iron pan | manganese                                    | charcoal                                 | plant remains* | natural infilling <input type="checkbox"/>                   |
|                                                                   |         |                                                                                                                                       |          |                                              |                                          |                | colluvial layer <input type="checkbox"/>                     |
|                                                                   |         |                                                                                                                                       |          |                                              |                                          |                | in situ burning <input type="checkbox"/>                     |
|                                                                   |         |                                                                                                                                       |          |                                              |                                          |                | post-pipe <input type="checkbox"/>                           |
|                                                                   |         |                                                                                                                                       |          |                                              |                                          |                | packing <input type="checkbox"/>                             |
|                                                                   |         |                                                                                                                                       |          |                                              |                                          |                | cremation <input type="checkbox"/>                           |
|                                                                   |         |                                                                                                                                       |          |                                              |                                          |                | other fill/deposit (describe below) <input type="checkbox"/> |
| frequency                                                         |         |                                                                                                                                       |          |                                              |                                          |                |                                                              |
| bulk find                                                         |         |                                                                                                                                       |          |                                              |                                          |                |                                                              |

### CROSS REFERENCE

|                     |                               |                      |                                                                                                                                       |
|---------------------|-------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><br>— | Finds nos<br>F55866<br>F55915 | Photo nos<br>0500686 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/><br><br>— . |
|---------------------|-------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------|

|                                       |                                                                         |
|---------------------------------------|-------------------------------------------------------------------------|
| Basic process                         |                                                                         |
| construction <input type="checkbox"/> | use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date 04/08/17                         |                                                                         |
| Initials P.T.                         |                                                                         |
| Checked by L.A.S.                     |                                                                         |

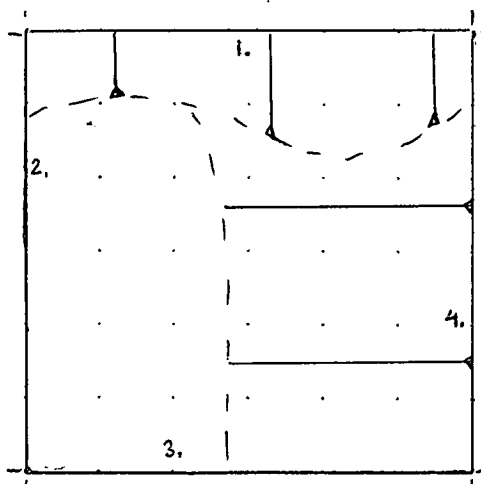
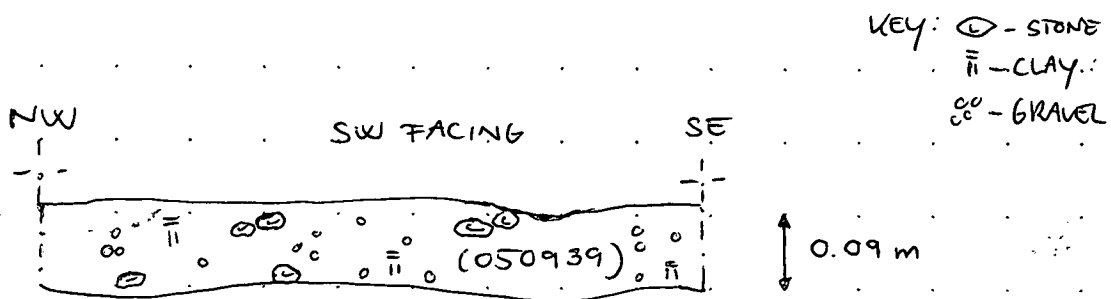
This form is incomplete if fields marked with  are empty. PTO for additional information (and describing all items marked with \*) and sketches.

(050939) IS A LIGHT ORANGEISH-BROWN COLOUR DEPOSITION OF AN OCCUPATION LAYER. IT IS MODERATELY GRAVELLY. IT HAS POTTERY FRAGMENTS, SHATTERED ANIMAL BONES, CBM AND A METAL NAIL HEAD RECOVERED. IT IS RELATIVELY SHALLOW, IT IS AROUND 0.10 m DEEP IN GENERAL.

Refer to context:

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



DEPTHS: 1.) 0.09 m  
 2.) 0.11 m  
 3.) 0.10 m  
 4.) 0.10 m

MOLA HEADLAND  
INFRASTRUCTURE

## CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEAS</b> | Sub-area/Trench<br><b>1</b>       | Context number<br><b>(050940)</b>                                                                                      |
| ECB #                   | Subgroup                  | Parent context<br><b>(050940)</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |  |  |  |                 |
|--|--|--|--|--|-----------------|
|  |  |  |  |  | Same as context |
|  |  |  |  |  | Cuts context    |
|  |  |  |  |  | Cut by context  |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                               | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |  |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          |  | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate sloping<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* |  | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                                       |  | <b>Width</b>                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <b>Depth</b>                                                                                                                                                                                                                                                                                 |  | <b>Diameter</b>                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|----------------|-----------------|-------|-------|------------------|---------|--------------|-----------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-----------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input checked="" type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input checked="" type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat |                          | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>bulk find</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | stones*                  | chalk                               | iron pan                            | manganese                           | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone | frequency |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | bulk find | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | chalk                    | iron pan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | manganese                | charcoal                                                                                                                                                                                                                                                                              | plant remains*           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | wood                     | marine shell                        | bone*                               | pot                                 | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone   |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |

## CROSS REFERENCE

|            |                                                              |                             |                                                                                                                            |
|------------|--------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos<br><b>F55876</b><br><b>F55909</b><br><b>F55910</b> | Photo nos<br><b>0500695</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|------------|--------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☐ disuse ☒Date **4/9/17**Initials **R.O.C.**Checked by **L.B.B.**

This form is incomplete if fields marked with \* are empty. PIO for additional information (and describing all items marked with \*) and sketches.

Sieve  
Residue

TEST PIT 096 (050940) in The dark earth spread compact occupation layer dark and mottled brownish-grey colour with a silt-clay composition with ~~some~~ gravel inclusions.

Occasional charcoal inclusions (small pieces), occasional CBM scattered, moderate pottery and occasional ~~bone~~ animal bones.

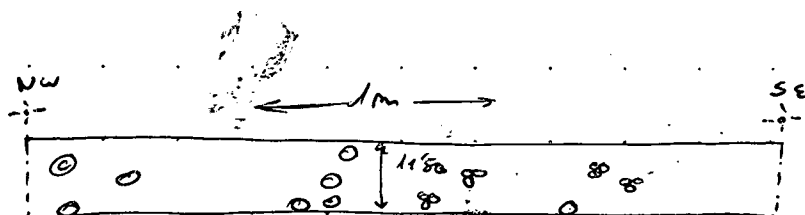
In the plan of the Test Pit 096 is possible to see a semi-circular shape ~~with~~ ~~the~~ ~~structure~~ and two different fills, the ~~third~~ ~~area~~ fill that take a semi-circular shape is mostly dark with a moderate charcoal inclusions and occasional gravels, the ~~surrounding~~ one is exactly the same described in first place. It is possible that this dark fill show us a pit. The only small find was found in this dark fill.

SPLIT 1: 11'50 on depth / 28 Pot. sherd / 3 CBM Pieces / 8 Pieces of Animal Bone  
14 Bags For sieving / 1 small find-iron object - F55 876

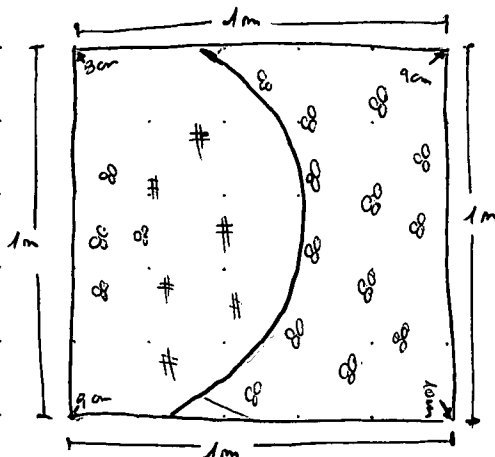
Refer to context

SKETCHES  
(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

N.T.S TPO96 (050940)



1 Split



key  
○ Stone  
⊙ Chalk  
⊗ gravel  
# Charcoal

# MOLA HEADLAND INFRASTRUCTURE



TP 099

## CONTEXT SHEET

|                         |                           |                             |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>(050941)</b>                                                                                      |
| ECB #<br>—              | Subgroup<br>—             | Parent context<br>—         | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                   |
|--|--|----------|--|--|-------------------|
|  |  | (050002) |  |  | Same as context — |
|  |  | (050941) |  |  | Cuts context —    |
|  |  | NOT REL. |  |  | Cut by context —  |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |               |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                      |               | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate sloping<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* |              | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>X <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                                        | <b>Depth</b> | <b>Diameter</b>                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |               |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input checked="" type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |           |          |                |           |              |                |      |                |       |                |                 |       |                |                  |         |              |                  |         |              |   |   |  |  |  |  |  |  |   |   |   |  |  |  |  |  |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|----------------|-----------|--------------|----------------|------|----------------|-------|----------------|-----------------|-------|----------------|------------------|---------|--------------|------------------|---------|--------------|---|---|--|--|--|--|--|--|---|---|---|--|--|--|--|--|--|--|--|
| <b>Thickness</b><br><b>± 0.10 m</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |          |                |           |              |                |      |                |       |                |                 |       |                |                  |         |              |                  |         |              |   |   |  |  |  |  |  |  |   |   |   |  |  |  |  |  |  |  |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |          |                |           |              |                |      |                |       |                |                 |       |                |                  |         |              |                  |         |              |   |   |  |  |  |  |  |  |   |   |   |  |  |  |  |  |  |  |  |
| <table border="1"> <tr> <th>stones*</th> <th>chalk</th> <th>iron pan</th> <th>manganese</th> <th>charcoal</th> <th>plant remains*</th> <th>wood</th> <th>marine shell</th> <th>bone*</th> <th>pot</th> <th>fireclay / CBM</th> <th>CTP</th> <th>mortar/plaster</th> <th>leather/textile</th> <th>glass</th> <th>metal</th> <th>industrial waste</th> <th>lithics</th> <th>coarse stone</th> </tr> <tr> <td>O</td> <td>O</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>O</td> <td>O</td> <td>O</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | stones*   | chalk    | iron pan       | manganese | charcoal     | plant remains* | wood | marine shell   | bone* | pot            | fireclay / CBM  | CTP   | mortar/plaster | leather/textile  | glass   | metal        | industrial waste | lithics | coarse stone | O | O |  |  |  |  |  |  | O | O | O |  |  |  |  |  |  |  |  |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | iron pan                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | manganese | charcoal | plant remains* | wood      | marine shell | bone*          | pot  | fireclay / CBM | CTP   | mortar/plaster | leather/textile | glass | metal          | industrial waste | lithics | coarse stone |                  |         |              |   |   |  |  |  |  |  |  |   |   |   |  |  |  |  |  |  |  |  |
| O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |          |                |           | O            | O              | O    |                |       |                |                 |       |                |                  |         |              |                  |         |              |   |   |  |  |  |  |  |  |   |   |   |  |  |  |  |  |  |  |  |
| <b>bulk find</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |          |                |           |              |                |      |                |       |                |                 |       |                |                  |         |              |                  |         |              |   |   |  |  |  |  |  |  |   |   |   |  |  |  |  |  |  |  |  |

### CROSS REFERENCE

|                                                    |                       |                                    |                                                                                                                                  |
|----------------------------------------------------|-----------------------|------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| <b>Sample nos</b><br><b>S05108</b><br><b>1 Tuv</b> | <b>Finds nos</b><br>/ | <b>Photo nos</b><br><b>0500697</b> | <b>Drawing nos</b><br>Surveyed<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|----------------------------------------------------|-----------------------|------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------|
| <b>Basic process</b><br>construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
|---------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                             |
|---------------------------------------------------------------------------------------------|
| <b>Date</b> <b>04/09/12</b><br><b>Initials</b> <b>mg</b><br><b>Checked by</b> <b>J.B.S.</b> |
|---------------------------------------------------------------------------------------------|

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

DARK EARTH DEPOSIT, EXCAVATED AS PART OF TEST PIT 099. DARK GREYISH BROWN CLAYEY SILT DEPOSIT PERHAPS STAYS OUT FROM NEARBY TP 100 (TO THE SOUTH EAST) BY APPARENT LACK OF GRAVEL STONES. (050941) ONLY CONTAINING BUT AN OCCASIONAL ~~AMOUNT~~ AMOUNT OF STONES, COMPARED TO TP 100 (050956)'S MORE FREQUENT AMOUNT.

DEPOSIT CONTAINED POT, BONE AND SOME CBM FINDS.

THE THICKNESS OF DEPOSIT IS NOT UNIFORM AND ~~IS~~ AVERAGES AROUND 0.10M. AS GROUND BENEATH IT IS NOT LEVELLED, SOME ~~CHANGES~~ IRREGULARITIES WERE FILLED IN BY THE DEPOSIT.

IN LEFT CORNER OF SW FACING SECTION (= TOP LEFT CORNER IN PLAN), THERE IS A CIRCULAR FEATURE, WHICH APPEARS TO BE INFILLED BY THE DEPOSIT. THE EDGES ARE SMOOTH AND UNICEAR, EVEN THOUGH ~~THE~~ COLOUR DIFFERENCE BETWEEN BROWN SOIL (NATURAL) AND DEPOSIT (050941) IS VERY APPARENT.

SIMILARLY A FAINT LINEAR BLOB IS VISIBLE BELOW THE AFOREMENTIONED \*

Refer to context

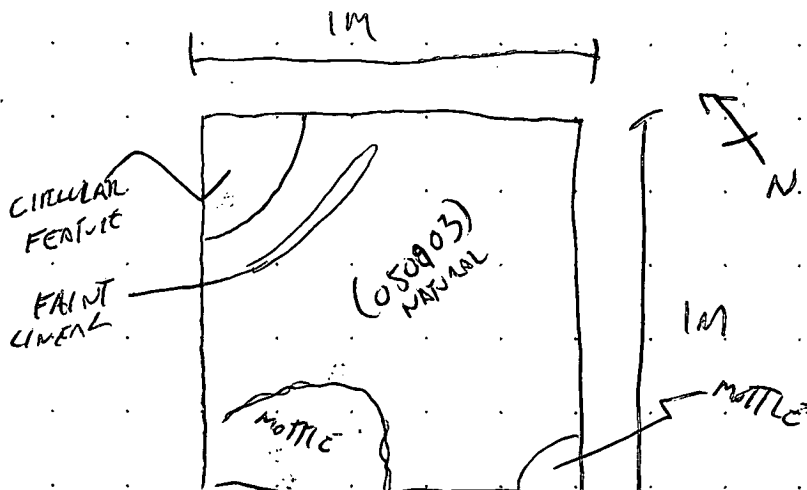
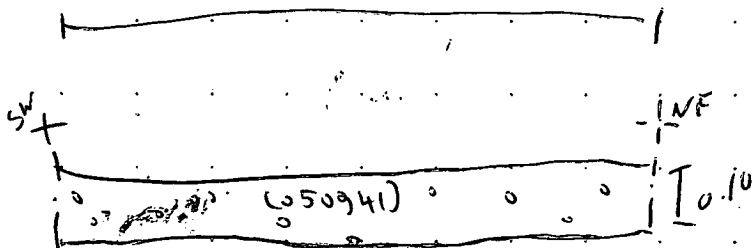
SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

\* CIRCULAR FEATURE. THIS, TOO, ~~SEEMS TO BE~~ APPEARS NOT TO BE ARCHAEOLOGICAL. IN ADDITION TO THAT, SOUTHERN PART OF PLAN ~~IS~~ IS ALSO MOTTLED.

NTS

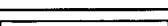
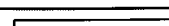
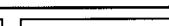
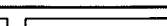
SW FACING SECTION  
1M





|                  |                    |                      |                                                                                                             |
|------------------|--------------------|----------------------|-------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA5 | Sub-area/Trench<br>1 | Context number<br>050942                                                                                    |
| ECB #<br>—       | Subgroup<br>—      | Parent context       | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|                                                                                   |                                                                                   |                                                                                   |                                                                                   |                                                                                    |                   |
|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------|-------------------|
|  |  |  |  |  | Same as context — |
|                                                                                   |                                                                                   |  |                                                                                   |                                                                                    | Cuts context —    |
|  |  |  |  |  | Cut by context —  |

(if you are using this section score out section **FILL/DEPOSIT** below)

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                    |               | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="font-size: 2em; margin-right: 10px;">}</div> <div>sloping</div> </div> |              |                 |
| <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex*                                                            |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Depth</b> | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br><input type="checkbox"/> design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>              |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                 |

pit ☐

post-hole ☐

stake-hole ☐

ditch ☐

ring-ditch ☐

'beam slot' ☐

construction cut ☐

robber cut ☐

gully ☐

palaeochannel ☐

furrow ☐

field boundary ☐

burial cut ☐

other cut (describe below) ☐

(if you are using this section score out section **CUT** above)

### INTERPRETATION

|                                                                   |                                                        |                                                                                               |                                          |                                 |                                  |                                   |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                     |                          |                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|--------------------------------------------------------|-----------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------|----------------------------------|-----------------------------------|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b>                                                 |                                                        | <b>Colour</b>                                                                                 |                                          | <b>Composition</b>              |                                  |                                   |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                     |                          |                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> compact                                  | <input checked="" type="checkbox"/> moderately compact | light <input type="checkbox"/>                                                                | mid <input checked="" type="checkbox"/>  | dark <input type="checkbox"/>   | mottled <input type="checkbox"/> | clayey <input type="checkbox"/>   | <input type="checkbox"/> clay   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                     |                          |                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    |                                                        | brownish <input checked="" type="checkbox"/>                                                  | <input type="checkbox"/> brown           |                                 |                                  | silty <input type="checkbox"/>    | <input type="checkbox"/> silt   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                     |                          |                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> friable                                  |                                                        | greyish <input type="checkbox"/>                                                              | <input checked="" type="checkbox"/> grey |                                 |                                  | sandy <input type="checkbox"/>    | <input type="checkbox"/> sand   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                     |                          |                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                                        | orangeish <input type="checkbox"/>                                                            | <input type="checkbox"/> orange          |                                 |                                  | gravelly <input type="checkbox"/> | <input type="checkbox"/> gravel |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                     |                          |                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                                        | yellowish <input type="checkbox"/>                                                            | <input type="checkbox"/> yellow          |                                 |                                  | peaty <input type="checkbox"/>    | <input type="checkbox"/> peat   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                     |                          |                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b>                                                  |                                                        |                                                                                               |                                          |                                 |                                  |                                   |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                     |                          |                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.16m                                                             |                                                        | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> |                                          | other* <input type="checkbox"/> |                                  |                                   |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                     |                          |                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b>                                                 |                                                        |                                                                                               |                                          |                                 |                                  |                                   |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                     |                          |                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                                | chalk                                                                                         | iron pan                                 | manganese                       | charcoal                         | plant remains*                    | wood                            | marine shell                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | bone*                               | pot                                 | fired clay / CBM         | CTP                                                          | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |                          |                          |                          |
| frequency                                                         | M                                                      |                                                                                               |                                          |                                 |                                  |                                   |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | O                                   | O                                   | O                        |                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                         | <input type="checkbox"/>                               | <input type="checkbox"/>                                                                      | <input type="checkbox"/>                 | <input type="checkbox"/>        | <input type="checkbox"/>         | <input type="checkbox"/>          | <input type="checkbox"/>        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                   |                                                        |                                                                                               |                                          |                                 |                                  |                                   |                                 | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/> |                                     |                                     |                          | other fill/deposit (describe below) <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |

### Basic process

|                      |                                                   |                    |                                                                                                                            |                                                                                                                                                                   |
|----------------------|---------------------------------------------------|--------------------|----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>505109 | Finds nos<br><del>44444</del><br><del>55405</del> | Photo nos<br>50068 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/><br>Date 5/9/17<br>Initials JBC<br>Checked by L.B.B. |
|----------------------|---------------------------------------------------|--------------------|----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|

*This form is incomplete if fields marked with  are empty. PTO for additional information (and describing all items marked with \*) and sketches.*

Sie've Find

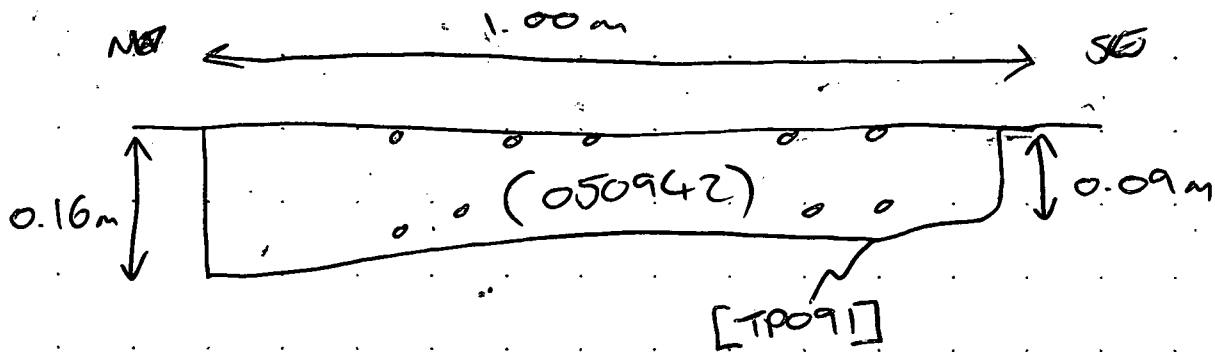
F 55924

TP091 THROUGH occupation layer  
TEST PIT MEASURED 1m x 1m & 0.16m at its  
lowest depth.  
included deposit (050942) which is made  
up of silty clay with mod. small angular  
stones, occ. charcoal flecks, occ. pottery  
frags. & occ. A bone frags. & occ. CBM  
frags.

Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



South-West Facing Section Sketch

|                  |                    |                      |                                                                                                                        |
|------------------|--------------------|----------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA5 | Sub-area/Trench<br>1 | Context number<br>(050943)                                                                                             |
| ECB #            | Subgroup<br>—      | Parent context<br>—  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (050002) |  |  | Same as context | — |
|  |  | (050943) |  |  | Cuts context    | — |
|  |  |          |  |  | Cut by context  | — |

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                 |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br>N<br>                                         | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                 | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                 |

### INTERPRETATION

|                                                                   |                                                        |                                    |                                           |                                 |                                                                      |                                           |                                          |                                             |                                     |                                     |                          |                                                      |                          |                          |                          |                          |                          |                          |                          |                                                              |
|-------------------------------------------------------------------|--------------------------------------------------------|------------------------------------|-------------------------------------------|---------------------------------|----------------------------------------------------------------------|-------------------------------------------|------------------------------------------|---------------------------------------------|-------------------------------------|-------------------------------------|--------------------------|------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------------------------------------------|
| <b>Compaction</b>                                                 |                                                        | <b>Colour</b>                      |                                           | <b>Composition</b>              |                                                                      |                                           |                                          |                                             |                                     |                                     |                          |                                                      |                          |                          |                          |                          |                          |                          |                          |                                                              |
| <input type="checkbox"/> compact                                  | <input checked="" type="checkbox"/> moderately compact | light <input type="checkbox"/>     | mid <input type="checkbox"/>              | dark <input type="checkbox"/>   | <input checked="" type="checkbox"/> mottled <input type="checkbox"/> | clayey <input type="checkbox"/>           | <input checked="" type="checkbox"/> clay | topsoil <input type="checkbox"/>            |                                     |                                     |                          | subsoil <input type="checkbox"/>                     |                          |                          |                          |                          |                          |                          |                          |                                                              |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> friable                       | brownish <input type="checkbox"/>  | <input checked="" type="checkbox"/> brown | <input type="checkbox"/> grey   | <input type="checkbox"/>                                             | silty <input checked="" type="checkbox"/> | <input type="checkbox"/> silt            | geological subsoil <input type="checkbox"/> |                                     |                                     |                          | remnant topsoil <input type="checkbox"/>             |                          |                          |                          |                          |                          |                          |                          |                                                              |
|                                                                   |                                                        | greyish <input type="checkbox"/>   | <input type="checkbox"/> orange           | <input type="checkbox"/> yellow | <input type="checkbox"/>                                             | sandy <input type="checkbox"/>            | <input type="checkbox"/> sand            | surface <input type="checkbox"/>            |                                     |                                     |                          | occupation layer <input checked="" type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                                                              |
|                                                                   |                                                        | orangeish <input type="checkbox"/> | <input type="checkbox"/> red              | <input type="checkbox"/> blue   | <input type="checkbox"/>                                             | gravelly <input type="checkbox"/>         | <input type="checkbox"/> gravel          | dumped layer <input type="checkbox"/>       |                                     |                                     |                          | deliberate backfill <input type="checkbox"/>         |                          |                          |                          |                          |                          |                          |                          |                                                              |
|                                                                   |                                                        | yellowish <input type="checkbox"/> | <input type="checkbox"/> black            | <input type="checkbox"/> white  | <input type="checkbox"/> other* <input type="checkbox"/>             | peaty <input type="checkbox"/>            | <input type="checkbox"/> peat            | destruction debris <input type="checkbox"/> |                                     |                                     |                          | bedding layer <input type="checkbox"/>               |                          |                          |                          |                          |                          |                          |                          |                                                              |
| <b>Thickness</b>                                                  |                                                        |                                    |                                           |                                 |                                                                      |                                           |                                          |                                             |                                     |                                     |                          | natural infilling <input type="checkbox"/>           |                          |                          |                          |                          |                          |                          |                          |                                                              |
| 0.09m                                                             |                                                        |                                    |                                           |                                 |                                                                      |                                           |                                          |                                             |                                     |                                     |                          | colluvial layer <input type="checkbox"/>             |                          |                          |                          |                          |                          |                          |                          |                                                              |
| <b>Inclusions</b>                                                 |                                                        |                                    |                                           |                                 |                                                                      |                                           |                                          |                                             |                                     |                                     |                          | in situ burning <input type="checkbox"/>             |                          |                          |                          |                          |                          |                          |                          |                                                              |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                                | chalk                              | iron pan                                  | manganese                       | charcoal                                                             | plant remains*                            | wood                                     | marine shell                                | bone*                               | pot                                 | fired clay / CBM         | CTP                                                  | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             | post-pipe <input type="checkbox"/>                           |
| frequency                                                         |                                                        |                                    |                                           |                                 |                                                                      |                                           |                                          | O                                           | C                                   | O                                   |                          |                                                      |                          |                          |                          | O                        |                          |                          |                          | packing <input type="checkbox"/>                             |
| bulk find                                                         | <input type="checkbox"/>                               | <input type="checkbox"/>           | <input type="checkbox"/>                  | <input type="checkbox"/>        | <input type="checkbox"/>                                             | <input type="checkbox"/>                  | <input type="checkbox"/>                 | <input checked="" type="checkbox"/>         | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | cremation <input type="checkbox"/>                           |
|                                                                   |                                                        |                                    |                                           |                                 |                                                                      |                                           |                                          |                                             |                                     |                                     |                          |                                                      |                          |                          |                          |                          |                          |                          |                          | other fill/deposit (describe below) <input type="checkbox"/> |

### Basic process

|            |                            |                    |                                                                                                             |                                                                                                               |
|------------|----------------------------|--------------------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos                  | Photo nos          | Drawing nos                                                                                                 | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| S05111     | F55873<br>F55903<br>F55904 | 0500693<br>0500694 | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | Date 04/09/17                                                                                                 |
|            |                            |                    |                                                                                                             | Initials P.T.                                                                                                 |
|            |                            |                    |                                                                                                             | Checked by L.B.B.                                                                                             |

sieve find<sup>TH</sup>

This form is incomplete if fields marked with ☐ are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

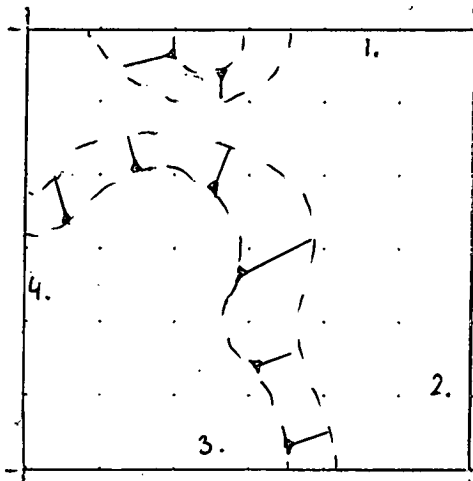
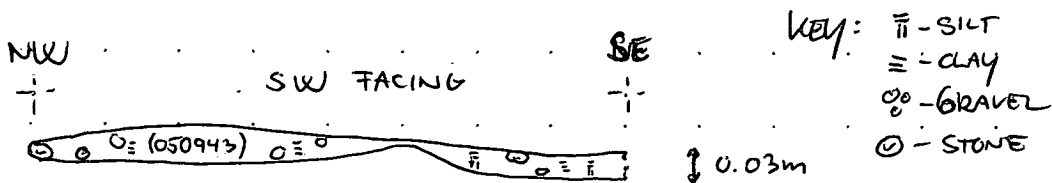
(any further details that may be important for understanding the context, including items marked \* overleaf)

(050943) IS A SHALLOW, ~~BLACK~~ DARK-BROWN COLOUR DEPOSITION OF AN OCCUPATION LAYER. IT HAD SEVERAL FRAGMENTS OF POTTERY, SHATTERED ANIMAL BONES, CBM AND A POSSIBLY ROMAN COIN BEEN RECOVERED. THIS FILL HAS BITS OF GRAVEL.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



DEPTHS: 1.) 0.03 m  
2.) 0.09 m  
3.) 0.04 m  
4.) 0.02 m

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                          |                             |                 |                                                                                                                        |
|--------------------------|-----------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TEA 05</b> | Sub-area/Trench | Context number<br><b>(050944)</b>                                                                                      |
| ECB #                    | Subgroup                    | Parent context  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(050002)</b> |  |  | Same as context |
|  |  | <b>(050944)</b> |  |  | Cuts context    |
|  |  |                 |  |  | Cut by context  |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                      | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input checked="" type="checkbox"/> other fill/deposit (describe below) <b>charcoal layer</b> |
| <b>Thickness</b><br><b>0.10</b>                                                                                                                                                       | black <input checked="" type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | other* <input type="checkbox"/>                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| frequency<br>bulk find                                                                                                                                                                | stones*<br>chalk<br>iron pan<br>manganese<br>charcoal<br>plant remains*<br>wood<br>marine shell<br>bone*<br>pot<br>fired clay / CBM<br>CTP<br>mortar/plaster<br>leather/textile<br>glass<br>metal<br>industrial waste<br>lithics<br>coarse stone                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |

### CROSS REFERENCE

|                             |                                          |                             |                                                                                                                            |
|-----------------------------|------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>505110</b> | Finds nos<br><b>F55917</b><br>sieve find | Photo nos<br><b>0500696</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|-----------------------------|------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>04/09/2017</b>                                                                                        |
| Initials <b>DSD</b>                                                                                           |
| Checked by                                                                                                    |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

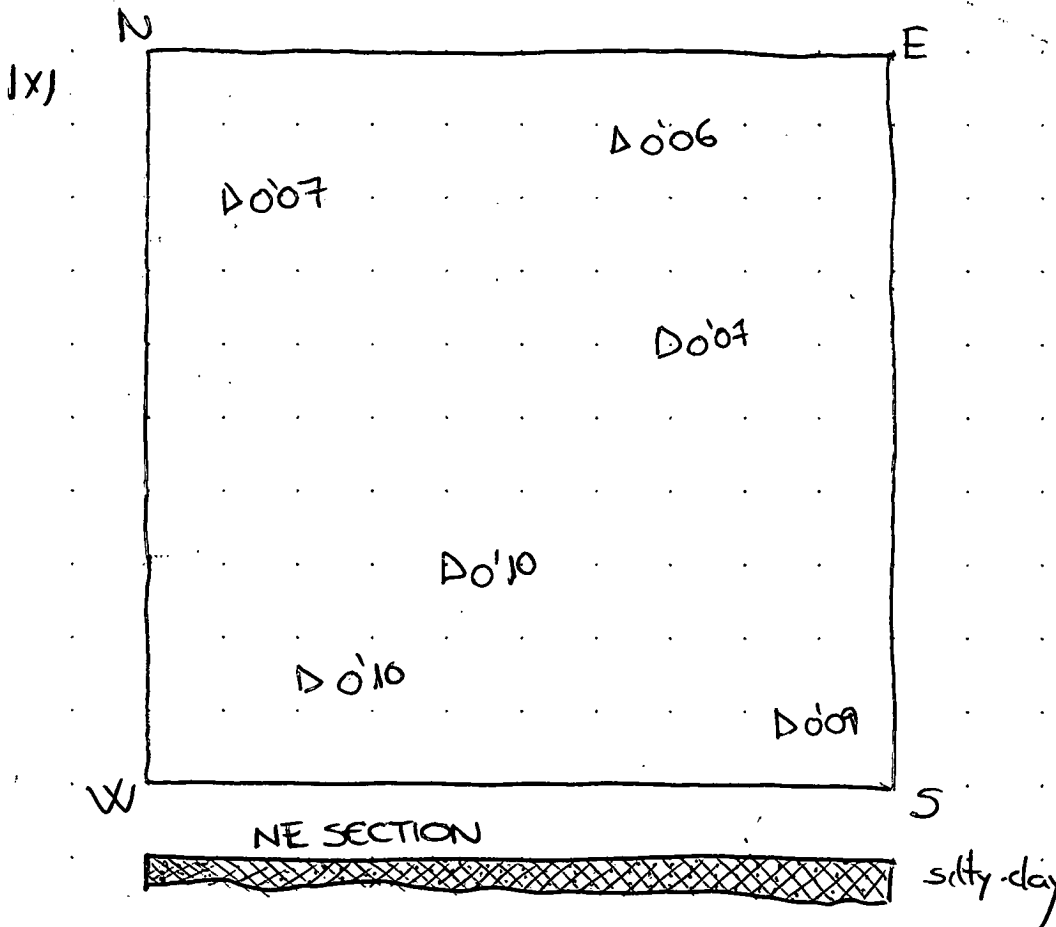
Deposit (050444), where basically we've only documented 0'10 m of thickness from the so-called "Dark Earth" deposit. Regarding the inclusions, all the piece of pots found are dated in Late Roman Period, Late Antiquity. Likewise, some meso-mammals bones have been documented.

On the other hand, we don't have much more information in order to characterized the "Dark Earth" Deposit and principally to know the several post-depositional agents that have altered and affected it.

Refer to context.

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



|                  |                     |                      |                                                                                                                        |
|------------------|---------------------|----------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA 5 | Sub-area/Trench<br>1 | Context number<br>650945                                                                                               |
| ECB #<br>—       | Subgroup<br>—       | Parent context<br>—  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |         |  |                 |   |
|--|--|----------|---------|--|-----------------|---|
|  |  | (050002) | 5185012 |  | Same as context | ✓ |
|  |  | (050945) |         |  | Cuts context    | — |
|  |  | NOT Aff. |         |  | Cut by context  | ✓ |

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                                                                                                                                                                                                                                              |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                                                                                                                                                                                                                                              |                 |
| <b>Orientation</b><br><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                  | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="font-size: 2em; margin-right: 10px;">}</div> <div>sloping</div> </div> |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input checked="" type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                 | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                                                                                                                                                                                                                                              |                 |

pit ☐

post-hole ☐

stake-hole ☐

ditch ☐

ring-ditch ☐

beam slot ☐

construction cut ☐

robber cut ☐

gully ☐

palaeochannel ☐

furrow ☐

field boundary ☐

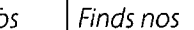
burial cut ☐

other cut (describe below) ☐

### INTERPRETATION

|                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown<br>greyish <input checked="" type="checkbox"/> <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> <input type="checkbox"/> red<br>blueish <input type="checkbox"/> <input type="checkbox"/> blue |                          | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> <input type="checkbox"/> clay<br>silty <input type="checkbox"/> <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat |                          | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input checked="" type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| <b>Thickness</b><br>0.12                                                                                                                                                              |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| frequency                                                                                                                                                                             | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                      | charcoal                 | plant remains*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | wood                     | marine shell             | bone*                               | pot*                                | fired clay / CBM                    | CTP                      | *mortar/plaster          | leather/textile          | glass                    | metal F                             | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### Basic process

|                                                                                                   |                                                   |                      |                                                                                                                            |                                                                                                                                                                      |
|---------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br> | Finds nos<br>F55951<br>F55925<br>F55926<br>F55927 | Photo nos<br>0500700 | Drawing nos<br>Surveyed.<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/><br>Date 05/09/17<br>Initials ng<br>Checked by J. B. B. |
|---------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|

This form is incomplete if fields marked with ▼ are empty. PTO for additional information (and describing all items marked with \*) and sketches.

Sieve  
Finds

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

DARK EARTH DEPOSIT EXCAVATED AS PART OF TEST PIT 098.  
 DEPOSIT IS SOME 0.12 M DEEP (SLIGHTLY DEEPER AT SOME ENDS DUE TO UNEVEN SURFACE).  
 DEPOSIT HAS SOME GRAVEL STONES INCLUSIONS, BUT SIGNIFICANTLY LESS THAN MOST PITS EXCAVATED - IT APPEARS SMOOTHER.  
 BENEATH IT IS BROWNISH GREY DEPOSIT/FILL WITH A SIGNIFICANT INCREASE OF CHALK AND CHARCOAL INCLUSIONS (COMPARED TO LOS0945). NO EDGES CAN BE SEEN, BUT OTHER EVIDENCE SUGGEST IT IS A DITCH.  
 ANIMAL  
 OF FINDS, BOTH SPIT 1 AND 2 PRODUCED A NUMBER OF BONE FRAGMENTS AND POT SHEERDS (BOTH HUMAN AND URUAG), PLUS MINOR FRAGMENTS OF CBM.  
 IN ADDITION, A HUB NAIL WAS FOUND IN SPIT 1.

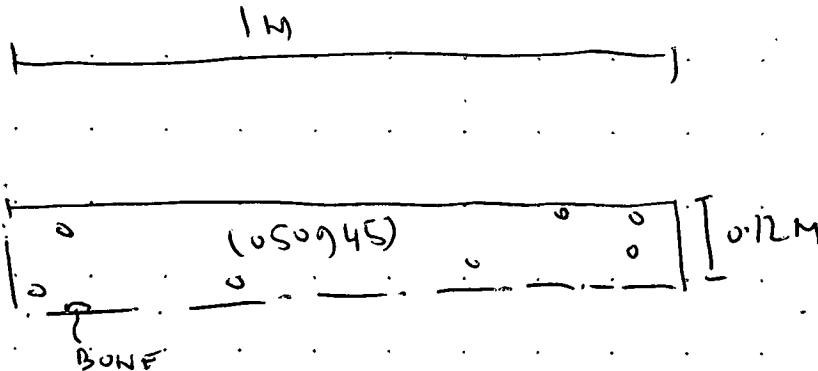
Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

SW FACING SECTION:

NTB



NOTE:

~~THE~~ IN PLAN, TEST PIT IS RELATIVELY UNIFORM,  
 SO PLAN SKETCH WAS ~~NOT~~ NOT DEEMED  
 NECESSARY.



# MOLA HEADLAND INFRASTRUCTURE



TP094

## CONTEXT SHEET

|                         |                            |                             |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>(050946)</b>                                                                                      |
| ECB.#                   | Subgroup<br><b>-</b>       | Parent context<br><b>-</b>  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (050002) |  |  | Same as context | - |
|  |  | (050946) |  |  | Cuts context    | - |
|  |  |          |  |  | Cut by context  | - |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |  | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          | <b>Sides</b><br>2 <input type="checkbox"/> vertical<br>2 <input type="checkbox"/> steep<br>2 <input type="checkbox"/> moderate sloping<br>2 <input type="checkbox"/> gentle<br>2 <input type="checkbox"/> stepped<br>2 <input type="checkbox"/> undercutting<br>2 <input type="checkbox"/> complex* | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>3 <input type="checkbox"/> complex* |              |                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|----------------|-----------|--------------|----------------|------|------------------|-------|----------------|------------------|-------|----------------|------------------|---------|--------------|------------------|---------|--------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input checked="" type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input checked="" type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/>                     | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input checked="" type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Thickness</b><br><b>0.10 m</b>                                                                                                                                                     | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                | <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | stones*   | chalk    | iron pan       | manganese | charcoal     | plant remains* | wood | marine shell     | bone* | pot            | fired clay / CBM | CTP   | mortar/plaster | leather/textile  | glass   | metal        | industrial waste | lithics | coarse stone |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| stones*                                                                                                                                                                               | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | iron pan                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | manganese | charcoal | plant remains* | wood      | marine shell | bone*          | pot  | fired clay / CBM | CTP   | mortar/plaster | leather/textile  | glass | metal          | industrial waste | lithics | coarse stone |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>frequency</b><br>bulk find <input type="checkbox"/>                                                                                                                                | <table border="1"> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

### CROSS REFERENCE

|                        |                       |                             |                                                                                                                            |
|------------------------|-----------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>-</b> | Finds nos<br><b>-</b> | Photo nos<br><b>0500699</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|------------------------|-----------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☐ use ☒ disuse ☐

Date **05/09/17**

Initials **P.T.**

Checked by **L.B.B.**

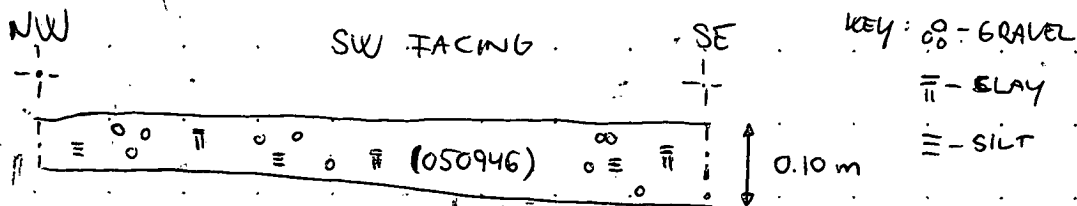
This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

(050946) IS A SHALLOW DEPOSITION OF A MOTTLED ORANGEISH-BROWN OCCUPATION LAYER. THERE ARE FRAGMENTED POTS AND SHATTERED ANIMAL BONES AMONG THE FINDS. ALSO SOME CBM HAVE BEEN FOUND HERE. BASED ON THE TYPE OF POTTERY RECOVERED HERE IT SEEMS LIKE IT CAN BE DATED TO THE ROMAN PERIOD.

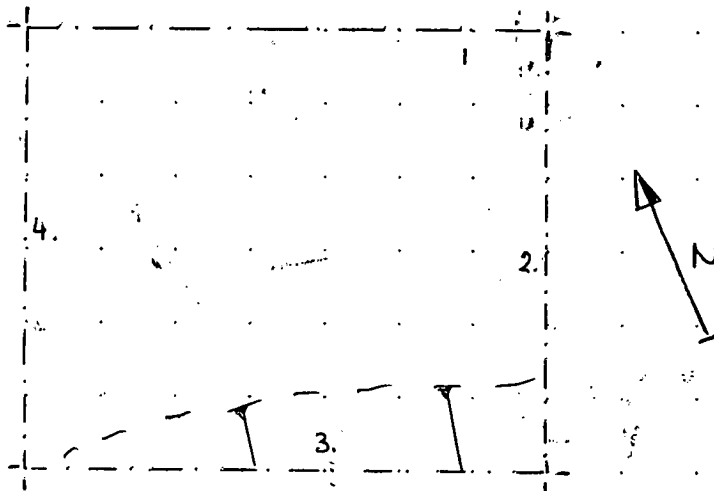
Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



DEPTHS: 1, 0.10 m  
 2, 0.05 m  
 3, 0.06 m  
 4, 0.06 m



# MOLA HEADLAND INFRASTRUCTURE



TP090  
1 of 2 SPs  
CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>AIY</b> | Area/Field<br><b>FEAS</b> | Sub-area/Trench<br><b>#1</b>      | Context number<br><b>(050947)</b>                                                                                      |
| ECB #                   | Subgroup                  | Parent context<br><b>(050947)</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |  |  |  |                 |
|--|--|--|--|--|-----------------|
|  |  |  |  |  | Same as context |
|  |  |  |  |  | Cuts context    |
|  |  |  |  |  | Cut by context  |

## CUT

(if you are using this section score out section **FILL/DEPOSIT** below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                 |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          |  | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate sloping<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* |              | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

## FILL/DEPOSIT

(if you are using this section score out section **CUT** above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          |                                                                                                                                                                                                                                                                                                                                                                                                      |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input checked="" type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input checked="" type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input checked="" type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input checked="" type="checkbox"/> |                          | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b>                                                                                                                                                                                 |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          |                                                                                                                                                                                                                                                                                                                                                                                                      |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                           |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          |                                                                                                                                                                                                                                                                                                                                                                                                      |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                                        | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                                            | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## CROSS REFERENCE

|            |                                                                               |                                                                 |                                                                                                                            |
|------------|-------------------------------------------------------------------------------|-----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos<br><b>F55892</b><br><b>F55893</b><br><b>F55894</b><br><b>F55895</b> | Photo nos<br><b>0500709</b><br><b>0500710</b><br><b>0500711</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|------------|-------------------------------------------------------------------------------|-----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                |
|--------------------------------------------------------------------------------------------------------------------------------|
| Basic process<br>construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|--------------------------------------------------------------------------------------------------------------------------------|

|                          |
|--------------------------|
| Date <b>6/9/17</b>       |
| Initials <b>P.D.C.</b>   |
| Checked by <b>J.B.B.</b> |

F55811  
F55813 - sieve finds  
This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

TEST PIT 090 in dark silt, moderately compact occupation layer dark mottled brownish-grey colour with a ~~small~~ silt/clay composition. Occasional inclusions of charcoal (small pieces and only one ~~big~~ <sup>big</sup> piece). Presence of pottery, animal bones and metal. It is important emphasize that in the area SW of the test pit 090 <sup>were found</sup> big and medium size stones, ~~some~~ some of them have straight sides similar to CBM elements. The 3 pieces of metal were found near to the stones, this stone formation and the presence of metal could be indicating a structure ~~indicated~~ ~~indicated~~. Also, is possible to see two different fills in the pit, one with the stones ~~and~~ <sup>and</sup> ~~the~~ <sup>the</sup> ~~other~~ <sup>other</sup> with a semicircular shape (the first one with a more silt). A singular geological formation was found in the SW area of the TP 090.

S PIT 1: 10 cm depth / 17 Pot. sherds orange and grey clay / 8 Fragm. of animal bone (F55893)

S PIT 2: 6 cm max depth / 17 Pot. sherds / 5 Fragm. of animal bone / 1 Flint tool / 1 Frag. of iron / 1 Fragm. of metal possible Tin (F55894)

A fragment of metal (possible bronze) in top soil near to the edge of the TP. (F55895)

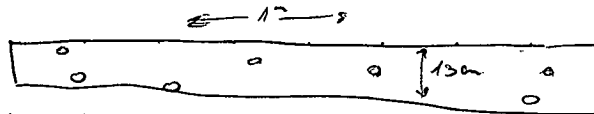
A fragment of unique geological formation associated to the concentration of stones

Refer to context

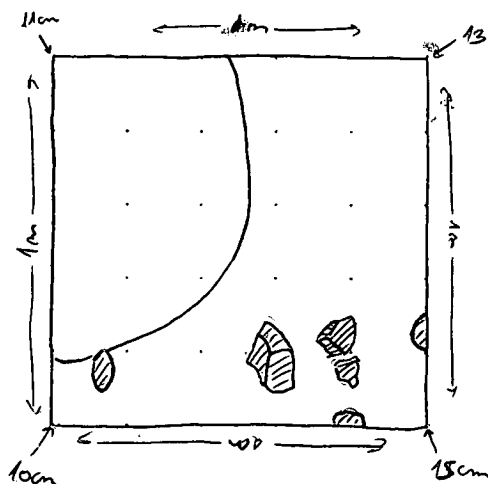
SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

NIS TP090 (050947)



key  
□ stone



The stones are on the interface layer change

**MOLA HEADLAND**  
INFRASTRUCTURE



## CONTEXT SHEET

|                  |                     |                 |                                                                                                                        |
|------------------|---------------------|-----------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA05 | Sub-area/Trench | Context number<br>(050948)                                                                                             |
| ECB #            | Subgroup            | Parent context  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                                                                                   |  |  |                 |
|--|--|-----------------------------------------------------------------------------------|--|--|-----------------|
|  |  | (050002)                                                                          |  |  | Same as context |
|  |  | (050948)                                                                          |  |  | Cuts context    |
|  |  |  |  |  | Cut by context  |

CUT

(if you are using this section score put section **FILL/DEPOSIT** below)

## DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">  <input type="checkbox"/> vertical<br/>  <input type="checkbox"/> steep<br/>  <input type="checkbox"/> moderate<br/>  <input type="checkbox"/> gentle<br/>  <input type="checkbox"/> stepped<br/>  <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex         </div> <div>           sloping         </div> </div> |              | <b>Base</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">  <input type="checkbox"/> flat<br/>  <input type="checkbox"/> concave<br/>  <input type="checkbox"/> V-shaped<br/>  <input type="checkbox"/> sloping<br/>  <input type="checkbox"/> uneven<br/> <input type="checkbox"/> complex*         </div> </div> |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |

**FILL/DEPOSIT**

(if you are using this section score out section **CUT** above)

## DESCRIPTION

### INTERPRETATION

|                                                                       |                                                                                                                              |                                                                                                                                       |                                           |                                 |                                          |                          |                          |                          |                                     |                                     |                                     |                                                   |                          |                          |                          |                                                                         |                          |                          |                          |                          |  |  |  |
|-----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|---------------------------------|------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--|--|--|
| <b>Compaction</b>                                                     |                                                                                                                              | <b>Colour</b>                                                                                                                         |                                           | <b>Composition</b>              |                                          |                          |                          |                          |                                     |                                     |                                     |                                                   |                          |                          |                          |                                                                         |                          |                          |                          |                          |  |  |  |
| <input type="checkbox"/> compact                                      | <input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/> |                                           | clayey <input type="checkbox"/> | <input checked="" type="checkbox"/> clay |                          |                          |                          |                                     |                                     |                                     |                                                   |                          |                          |                          |                                                                         |                          |                          |                          |                          |  |  |  |
| <input checked="" type="checkbox"/> brownish <input type="checkbox"/> |                                                                                                                              | brown <input type="checkbox"/>                                                                                                        | silty <input checked="" type="checkbox"/> | <input type="checkbox"/> silt   |                                          |                          |                          |                          |                                     |                                     |                                     |                                                   |                          |                          |                          |                                                                         |                          |                          |                          |                          |  |  |  |
| <input type="checkbox"/> greyish <input type="checkbox"/>             |                                                                                                                              | grey <input type="checkbox"/>                                                                                                         | sandy <input type="checkbox"/>            | <input type="checkbox"/> sand   |                                          |                          |                          |                          |                                     |                                     |                                     |                                                   |                          |                          |                          |                                                                         |                          |                          |                          |                          |  |  |  |
| <input type="checkbox"/> orangeish <input type="checkbox"/>           |                                                                                                                              | orange <input type="checkbox"/>                                                                                                       | gravelly <input type="checkbox"/>         | <input type="checkbox"/> gravel |                                          |                          |                          |                          |                                     |                                     |                                     |                                                   |                          |                          |                          |                                                                         |                          |                          |                          |                          |  |  |  |
| <input type="checkbox"/> yellowish <input type="checkbox"/>           |                                                                                                                              | yellow <input type="checkbox"/>                                                                                                       | peaty <input type="checkbox"/>            | <input type="checkbox"/> peat   |                                          |                          |                          |                          |                                     |                                     |                                     |                                                   |                          |                          |                          |                                                                         |                          |                          |                          |                          |  |  |  |
| <input type="checkbox"/> reddish <input type="checkbox"/>             |                                                                                                                              | red <input type="checkbox"/>                                                                                                          |                                           |                                 |                                          |                          |                          |                          |                                     |                                     |                                     |                                                   |                          |                          |                          |                                                                         |                          |                          |                          |                          |  |  |  |
| <input type="checkbox"/> bluish <input type="checkbox"/>              |                                                                                                                              | blue <input type="checkbox"/>                                                                                                         |                                           |                                 |                                          |                          |                          |                          |                                     |                                     |                                     |                                                   |                          |                          |                          |                                                                         |                          |                          |                          |                          |  |  |  |
| <b>Thickness</b><br>0'10                                              |                                                                                                                              | black <input checked="" type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                              |                                           | other* <input type="checkbox"/> |                                          |                          |                          |                          |                                     |                                     |                                     |                                                   |                          |                          |                          |                                                                         |                          |                          |                          |                          |  |  |  |
| <b>Inclusions</b>                                                     |                                                                                                                              |                                                                                                                                       |                                           |                                 |                                          |                          |                          |                          |                                     |                                     |                                     |                                                   |                          |                          |                          |                                                                         |                          |                          |                          |                          |  |  |  |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent     | stones*                                                                                                                      | chalk                                                                                                                                 | iron pan                                  | manganese                       | charcoal                                 | plant remains*           | wood                     | marine shell             | bone*                               | pot                                 | fired clay / CBM                    | CTP                                               | mortar/plaster           | leather/textile          | glass                    | metal                                                                   | industrial waste         | lithics                  | coarse stone             |                          |  |  |  |
| frequency                                                             | O                                                                                                                            | O                                                                                                                                     |                                           |                                 | O                                        |                          |                          |                          | O                                   | M                                   | O                                   |                                                   |                          |                          |                          |                                                                         |                          |                          |                          |                          |  |  |  |
| bulk find                                                             | <input type="checkbox"/>                                                                                                     | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/>                  | <input type="checkbox"/>        | <input type="checkbox"/>                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |  |  |
|                                                                       |                                                                                                                              |                                                                                                                                       |                                           |                                 |                                          |                          |                          |                          |                                     |                                     |                                     | topsoil <input type="checkbox"/>                  |                          |                          |                          | subsoil <input type="checkbox"/>                                        |                          |                          |                          |                          |  |  |  |
|                                                                       |                                                                                                                              |                                                                                                                                       |                                           |                                 |                                          |                          |                          |                          |                                     |                                     |                                     | geological subsoil <input type="checkbox"/>       |                          |                          |                          | remnant topsoil <input type="checkbox"/>                                |                          |                          |                          |                          |  |  |  |
|                                                                       |                                                                                                                              |                                                                                                                                       |                                           |                                 |                                          |                          |                          |                          |                                     |                                     |                                     | surface occupation layer <input type="checkbox"/> |                          |                          |                          | dumped layer <input type="checkbox"/>                                   |                          |                          |                          |                          |  |  |  |
|                                                                       |                                                                                                                              |                                                                                                                                       |                                           |                                 |                                          |                          |                          |                          |                                     |                                     |                                     | deliberate backfill <input type="checkbox"/>      |                          |                          |                          | destruction debris <input type="checkbox"/>                             |                          |                          |                          |                          |  |  |  |
|                                                                       |                                                                                                                              |                                                                                                                                       |                                           |                                 |                                          |                          |                          |                          |                                     |                                     |                                     | bedding layer <input type="checkbox"/>            |                          |                          |                          | natural infilling <input type="checkbox"/>                              |                          |                          |                          |                          |  |  |  |
|                                                                       |                                                                                                                              |                                                                                                                                       |                                           |                                 |                                          |                          |                          |                          |                                     |                                     |                                     | colluvial layer <input type="checkbox"/>          |                          |                          |                          | in situ burning <input type="checkbox"/>                                |                          |                          |                          |                          |  |  |  |
|                                                                       |                                                                                                                              |                                                                                                                                       |                                           |                                 |                                          |                          |                          |                          |                                     |                                     |                                     | post-pipe <input type="checkbox"/>                |                          |                          |                          | packing <input type="checkbox"/>                                        |                          |                          |                          |                          |  |  |  |
|                                                                       |                                                                                                                              |                                                                                                                                       |                                           |                                 |                                          |                          |                          |                          |                                     |                                     |                                     | cremation <input type="checkbox"/>                |                          |                          |                          | other fill/deposit (describe below) <input checked="" type="checkbox"/> |                          |                          |                          |                          |  |  |  |
|                                                                       |                                                                                                                              |                                                                                                                                       |                                           |                                 |                                          |                          |                          |                          |                                     |                                     |                                     | Attainment Layer                                  |                          |                          |                          |                                                                         |                          |                          |                          |                          |  |  |  |

### CROSS REFERENCE

|                      |                |                      |                                                                                                                            |
|----------------------|----------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>505112 | Finds nos<br>/ | Photo nos<br>0500701 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|----------------------|----------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|

Basic process  
 construction ☐ use ☐ disuse ☒  
 Date 05/09/17  
 Initials RSR  
 Checked by L.B.B.

This form is incomplete if fields marked with ☐ are empty. P/O for additional information (and describing all items marked with \*) and sketches.

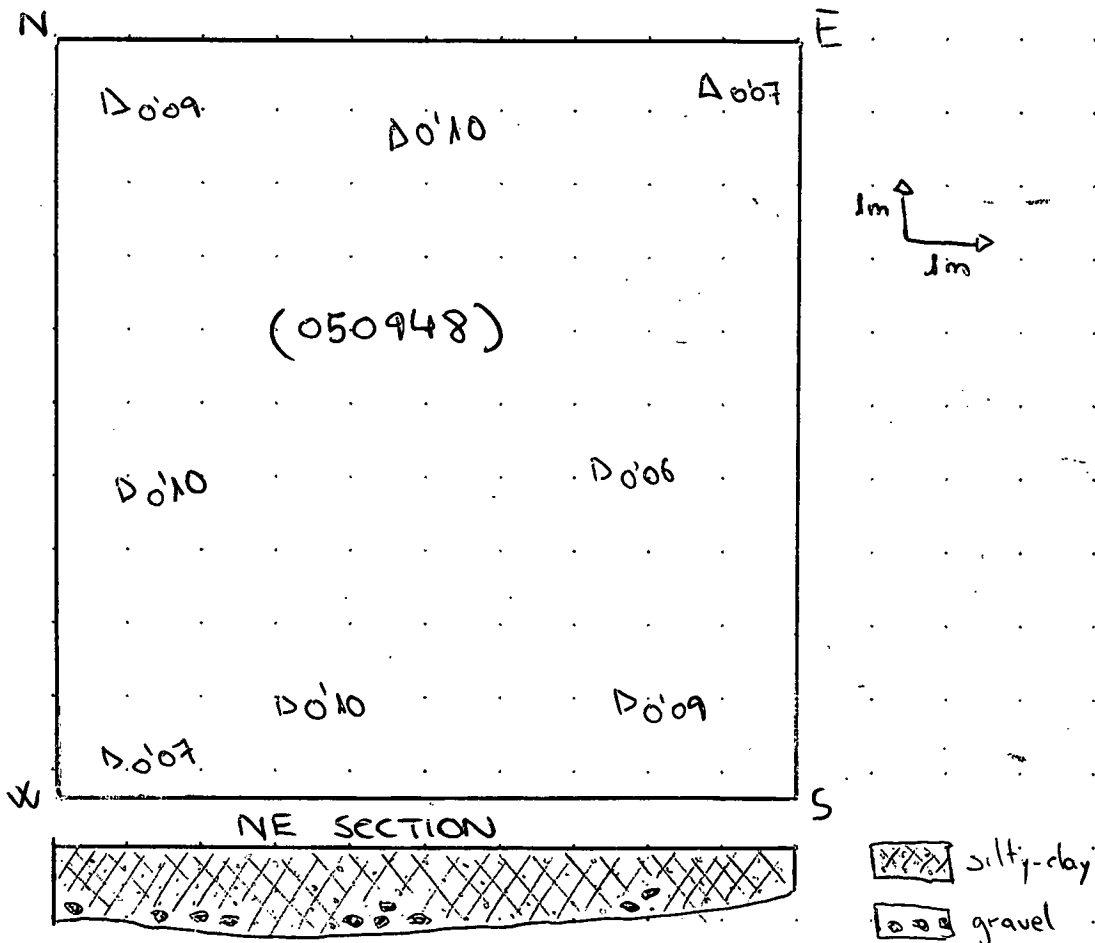
Deposit (050948), where basically 0'10 m of thick have been excavated; therefore the so-called "Dark Earth" deposit has got less thickness than other test pits excavated in the S, SW of the "Test Pit Area". This situation probably means that the majority of the archaeological remains should be on such S, SW mentioned part, and our test pit would be perhaps the limit of the "Dark Earth" deposit in the NW.

Regarding the inclusions, the majority of pots can be dated in the Late Antiquity but also we've documented two indetermined pieces of "common pot".

Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



# MOLA HEADLAND INFRASTRUCTURE



TEST pit 025

## CONTEXT SHEET

|                         |                            |                             |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A.4</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>050949</b>                                                                                        |
| ECB #<br>—              | Subgroup<br>—              | Parent context<br>—         | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                   |
|--|--|---------------|--|--|-------------------|
|  |  | <b>050007</b> |  |  | Same as context — |
|  |  | <b>050949</b> |  |  | Cuts context —    |
|  |  |               |  |  | Cut by context —  |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>✓ <input type="checkbox"/> NE-SW<br>✓ <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                      | <b>Sides</b><br>} <input type="checkbox"/> vertical<br>} <input type="checkbox"/> steep<br>} <input type="checkbox"/> moderate sloping<br>} <input type="checkbox"/> gentle<br>} <input type="checkbox"/> stepped<br>} <input type="checkbox"/> undercutting<br>} <input type="checkbox"/> complex* | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>— <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |  |  |  |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------|------------------|---------|--------------|-----------|---|--|--|--|--|--|--|---|---|--|--|--|--|--|--|--|--|--|-----------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input checked="" type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |  |  |  |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b><br><b>0.08m</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |  |  |  |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |  |  |  |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td>M</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>O</td> <td>M</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>bulk find</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | stones*                  | chalk                    | iron pan                 | manganese                | charcoal                            | plant remains*                      | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal        | industrial waste | lithics | coarse stone | frequency | M |  |  |  |  |  |  | O | M |  |  |  |  |  |  |  |  |  | bulk find | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | manganese                | charcoal                 | plant remains*           | wood                     | marine shell                        | bone*                               | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone |                  |         |              |           |   |  |  |  |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | M                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          | O                                   | M                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |  |  |  |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |              |                  |         |              |           |   |  |  |  |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |  |  |  |  |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |

### CROSS REFERENCE

|                                                                                                             |                |                                               |                  |
|-------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------|------------------|
| Sample nos<br><b>508113</b>                                                                                 | Finds nos<br>/ | Photo nos<br><b>0500706</b><br><b>0500705</b> | Drawing nos<br>/ |
| Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |                |                                               |                  |

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>6/9/17</b>                                                                                            |
| Initials <b>BK</b>                                                                                            |
| Checked by                                                                                                    |

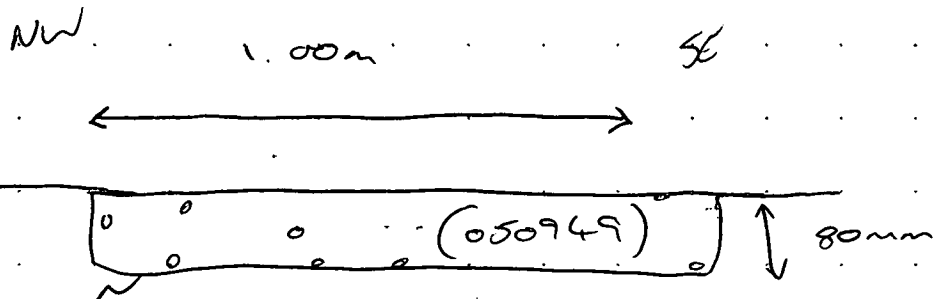
This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

1x1m TEST pit 025 put through dark  
occipatan layer.  
TEST pit undisturbed deposit (050949) which  
is made up of clay silt with mod. small  
angular stones, & occ. charcoal flecks.

Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



[TP025]

South - West facing section



# MOLA HEADLAND INFRASTRUCTURE



TP 022

## CONTEXT SHEET

|                         |                            |                             |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>(050950)</b>                                                                                      |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>       | Parent context<br><b>—</b>  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |                |  |                          |
|--|--|-----------------|----------------|--|--------------------------|
|  |  | <b>(050002)</b> | <b>subsoil</b> |  | Same as context <b>—</b> |
|  |  | <b>(050950)</b> |                |  | Cuts context <b>—</b>    |
|  |  | <b>NO 12 E1</b> |                |  | Cut by context <b>—</b>  |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input checked="" type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                                          | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                 |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                                     |  | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* |              | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input checked="" type="checkbox"/> v-shaped<br>S <input type="checkbox"/> sloping<br>U <input type="checkbox"/> uneven<br>C <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          |  | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                  |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------|--------------|-------|-----|------------------|-----|----------------|-----------------|-------|-------|------------------|---------|--------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |         | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |          | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |          | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Thickness</b><br><b>0.10</b>                                                                                                                                                       |         | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| frequency                                                                                                                                                                             | stones* | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan | manganese                                                                                                                                                                                                                                                                                                                                                                      | charcoal |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains* | wood | marine shell | bone* | pot | fired clay / CBM | CTP | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone |
| bulk find                                                                                                                                                                             |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |

### CROSS REFERENCE

|                        |                            |                             |                                                                                                                            |                                                                                                                                |
|------------------------|----------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>/</b> | Finds nos<br><b>F55912</b> | Photo nos<br><b>0500704</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | Basic process<br>construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
|                        |                            |                             |                                                                                                                            | Date <b>06/09/17</b><br>Initials <b>MG</b><br>Checked by <b>J. B. M.</b>                                                       |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

Steve Find

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

DEPOSIT EXCAVATED AS PART OF TEST PIT 022.

DEPOSIT IS ~~THICKER~~ LIGHTER IN COLOUR THAN THOSE EXCAVATED IN MAJORITY OF TEST PITS ON THIS SITE (IE. TP059, TP098 ETC)

MOST NOTABLY, DEPOSIT CONTAINED NO CHARCOAL, BUT DID CONTAIN OXIDISED ORANGE PARTICLES. PARTICLES WERE RECORDED AS "IRON PAN", BUT APPEAR MORE CRUMBLY. ~~THESE ARE~~

OF FINDS, ONLY SINGLE SMALL FRAGMENT OF CBM WAS FOUND, BUT THERE HAVE BEEN POTSHERDS (ROMAN AND IRON AGE) AND BONE FRAGMENTS (ANIMAL) ~~FOUND~~ PRESENT IN THE DEPOSIT.

DEPOSIT IS APPROX 10CM THICK AND ~~IS~~ IS LOCATED ON TOP OF A SIMILAR FILL, WHICH IS BROWNER IN COLOUR AND CONTAINS HIGHER NUMBER OF GRAVEL INCLUSIONS.

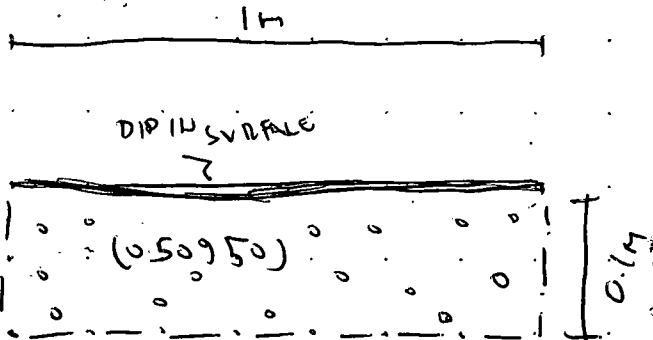
Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

SW-FACING SECTION:

N.B



NOTE: IN PLAN ~~THE~~ FILL BELOW IS UNIFORM.  
SO PLAN SKETCH WAS NOT DRAWN.



TP083

# CONTEXT SHEET

|                  |                     |                      |                                                                                                                        |
|------------------|---------------------|----------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA 5 | Sub-area/Trench<br>1 | Context number<br>(050951)                                                                                             |
| ECB #            | Subgroup<br>-       | Parent context<br>-  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (050002) |  |  | Same as context | - |
|  |  | (050951) |  |  | Cuts context    | - |
|  |  |          |  |  | Cut by context  | - |

## CUT

(if you are using this section score out section **FILL/DEPOSIT** below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |  | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input type="checkbox"/> steep<br>L <input type="checkbox"/> moderate sloping<br>L <input type="checkbox"/> gentle<br>L <input type="checkbox"/> stepped<br>L <input type="checkbox"/> undercutting<br>L <input type="checkbox"/> complex* | <b>Base</b><br>— <input type="checkbox"/> flat<br>— <input type="checkbox"/> concave<br>— <input type="checkbox"/> v-shaped<br>— <input type="checkbox"/> sloping<br>— <input type="checkbox"/> uneven<br>— <input type="checkbox"/> complex* |              |                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

(if you are using this section score out section **CUT** above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input checked="" type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input checked="" type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/><br>other* <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input checked="" type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>0.09m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent<br>stones* <input type="checkbox"/> chalk <input type="checkbox"/> iron pan <input type="checkbox"/> manganese <input type="checkbox"/> charcoal <input type="checkbox"/> plant remains* <input type="checkbox"/> wood <input type="checkbox"/> marine shell <input type="checkbox"/> bone* <input type="checkbox"/> pot <input type="checkbox"/> fired clay / CBM <input type="checkbox"/> CTP <input type="checkbox"/> mortar/plaster <input type="checkbox"/> leather/textile <input type="checkbox"/> glass <input type="checkbox"/> metal <input type="checkbox"/> industrial waste <input type="checkbox"/> lithics <input type="checkbox"/> coarse stone <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>frequency</b><br>bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | frequency <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|                      |                |                                  |                                                                                                                            |
|----------------------|----------------|----------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>S05114 | Finds nos<br>- | Photo nos.<br>0500702<br>0500703 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|----------------------|----------------|----------------------------------|----------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                |
|--------------------------------------------------------------------------------------------------------------------------------|
| Basic process<br>construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
|--------------------------------------------------------------------------------------------------------------------------------|

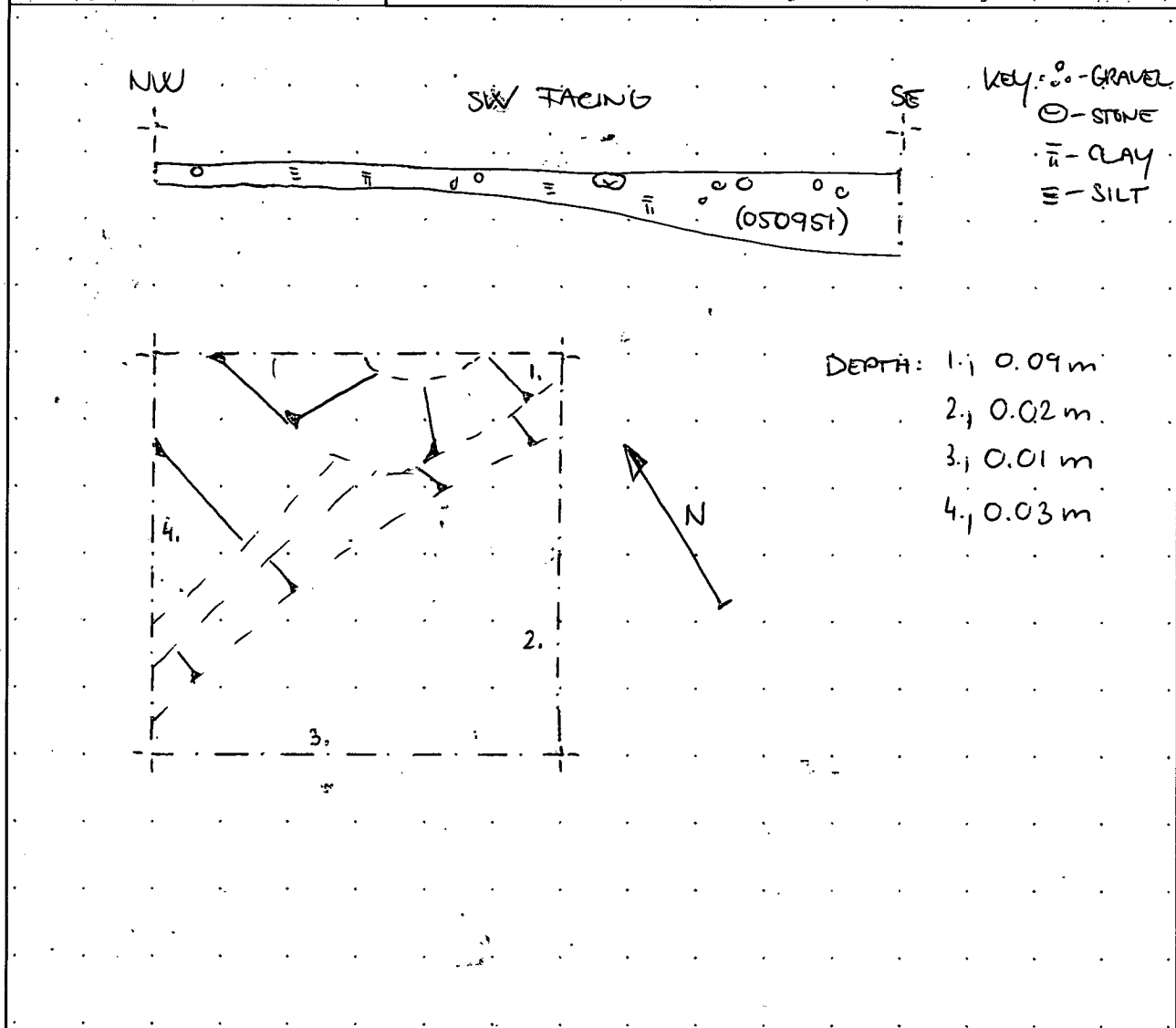
|                      |
|----------------------|
| Date<br>05/09/17     |
| Initials<br>P.T.     |
| Checked by<br>L.B.G. |

(050951) IS A SHALLOW DEPOSITION OF AN OCCUPATION LAYER. IT IS GRAVELLY IN ITS APPEARANCE WITH MOTTLED ORANGEISH-BROWN COLOUR. THERE ARE A FEW, POSSIBLY ROMAN, BROKEN POTS AND ALSO FRAGMENTED ANIMAL BONES FOUND HERE. AT THE SE END OF THE TEST PIT IT IS EVEN MORE SHALLOWER THAN AT THE REST OF IT, HERE ARE GRAVEL AND STONE ACCUMULATED. THE NW HALF OF THE TEST PIT IS MORE HOMOGENEOUS ON PLAN.

Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



|                  |                    |                      |                                                                                                                        |
|------------------|--------------------|----------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA5 | Sub-area/Trench<br>1 | Context number<br>(050952)                                                                                             |
| ECB #<br>—       | Subgroup<br>—      | Parent context<br>—  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |              |        |  |                   |
|--|--|--------------|--------|--|-------------------|
|  |  | (050002)     | NATURE |  | Same as context ✓ |
|  |  | (050952)     |        |  | Cuts context ✓    |
|  |  | NOT RECORDED |        |  | Cut by context ✓  |

(if you are using this section score out section **FILL/DEPOSIT** below)

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE | <b>Sides</b><br> <input type="checkbox"/> vertical<br> <input type="checkbox"/> steep<br> <input type="checkbox"/> moderate<br> <input type="checkbox"/> gentle<br> <input type="checkbox"/> stepped<br> <input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br> <input type="checkbox"/> flat<br> <input type="checkbox"/> concave<br> <input type="checkbox"/> v-shaped<br> <input type="checkbox"/> sloping<br> <input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |

(if you are using this section score out section **CUT** above)

## DESCRIPTION

### INTERPRETATION

| Compaction                                                        |                                                        | Colour                                                                                                                                |          | Composition                                |                                          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |
|-------------------------------------------------------------------|--------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------|------------------------------------------|----------------|------|--------------|-------|-----|------------------|-----|----------------|-----------------|-------|-------|------------------|---------|--------------|--|
| <input type="checkbox"/> compact                                  | <input checked="" type="checkbox"/> moderately compact | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> |          | clayey <input checked="" type="checkbox"/> | <input type="checkbox"/> clay            |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> friable                       | brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown                                                           |          | silty <input type="checkbox"/>             | <input checked="" type="checkbox"/> silt |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |
|                                                                   |                                                        | greyish <input checked="" type="checkbox"/> <input type="checkbox"/> grey                                                             |          | sandy <input type="checkbox"/>             | <input type="checkbox"/> sand            |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |
|                                                                   |                                                        | orangeish <input type="checkbox"/> <input type="checkbox"/> orange                                                                    |          | gravelly <input type="checkbox"/>          | <input type="checkbox"/> gravel          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |
|                                                                   |                                                        | yellowish <input type="checkbox"/> <input type="checkbox"/> yellow                                                                    |          | peaty <input type="checkbox"/>             | <input type="checkbox"/> peat            |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |
|                                                                   |                                                        | reddish <input type="checkbox"/> <input type="checkbox"/> red                                                                         |          |                                            |                                          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |
|                                                                   |                                                        | blueish <input type="checkbox"/> <input type="checkbox"/> blue                                                                        |          |                                            |                                          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |
| Thickness                                                         |                                                        | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                         |          | other* <input type="checkbox"/>            |                                          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |
| 0.08 *                                                            |                                                        |                                                                                                                                       |          |                                            |                                          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |
| Inclusions                                                        |                                                        |                                                                                                                                       |          |                                            |                                          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                                | chalk                                                                                                                                 | iron pan | manganese                                  | charcoal                                 | plant remains* | wood | marine shell | bone* | pot | fired clay / CBM | CTP | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone |  |
| frequency                                                         | O                                                      |                                                                                                                                       |          |                                            |                                          |                |      |              |       | O   | /                |     |                |                 |       |       |                  |         |              |  |
| bulk find                                                         |                                                        |                                                                                                                                       |          |                                            |                                          |                |      |              |       | X   |                  |     |                |                 |       |       |                  |         |              |  |

topsoil ☐

subsoil ☐

geological subsoil ☐

remnant topsoil ☐

surface ☐

occupation layer ☒

dumped layer ☐

deliberate backfill ☐

destruction debris ☐

bedding layer ☐

natural infilling ☐

colluvial layer ☐

in situ burning ☐

post-pipe ☐

packing ☐

cremation ☐

other fill/deposit (describe below) ☐

0.08 \*

### CROSS REFERENCE

|                      |                                                                                                  |                      |                                                                                                                                       |
|----------------------|--------------------------------------------------------------------------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>S05115 | Finds nos<br> | Photo nos<br>0500708 | <del>Drawing nos</del><br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|----------------------|--------------------------------------------------------------------------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------|

*Basic process*

construction ☐ use ☒ disuse ☐

Date 06/09/17

Initials MG

Checked by L. B. B.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

DEPOSIT WAS EXCAVATED AS PART OF TEST PIT 017.

DEPOSIT IS UP TO 0.08 M DEEP ON RECORDED (SW FACING) SECTION, BUT THIS DROPS TO 0.04 ON THE ~~OPPOSITE~~ OPPOSITE (NE FACING) SECTION. THIS IS DUE TO MACHINE STRIPPING LEVELS AND TO SOME EXTENT DUE TO HAND EXCAVATION.

SECTIONS ARE MOTTLED AND IN SOME PARTS SHOW MULTIPLE MID BROWNISH FLOCKS, SUGGESTING THE DARK EARTH HAS NOT FULLY FORMED.

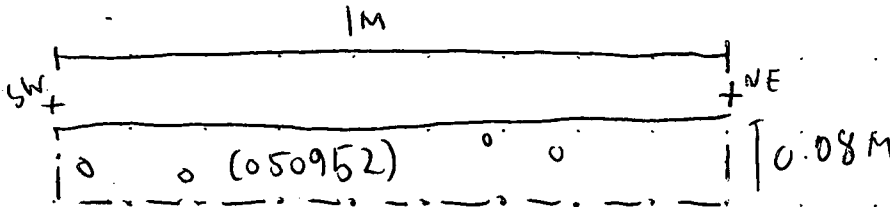
THERE IS A NOTABLE LACK OF FINDS, WITH ONLY TWO POT SHELDS RECOVERED FROM THE DEPOSIT. THEY ARE BELIEVED TO BE ROMAN AND IRON AGE TYPES.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

SW FACING SECTION:



NOTE: PLAN WAS NOT DRAWN DUE TO UNIFORMITY OF ~~RE~~ FEATURE IN PLAN.

|                  |                     |                      |                                                                                                                        |
|------------------|---------------------|----------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA 5 | Sub-area/Trench<br>1 | Context number<br>(050953)                                                                                             |
| ECB #            | Subgroup<br>—       | Parent context<br>—  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |                                                                                   |  |  |                 |   |
|--|--|-----------------------------------------------------------------------------------|--|--|-----------------|---|
|  |  | (050002)                                                                          |  |  | Same as context | — |
|  |  | (050953)                                                                          |  |  | Cuts context    | — |
|  |  |  |  |  | Cut by context  | ✓ |

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                        |              |                                                                                                                                                                                                                                   |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                        |              |                                                                                                                                                                                                                                   |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                    | <b>Sides</b><br><div> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> sloping |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                                          | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                                        |              |                                                                                                                                                                                                                                   |                 |

pit ☐  
 post-hole ☐  
 stake-hole ☐  
 ditch ☐  
 ring-ditch ☐  
 beam slot ☐  
 construction cut ☐  
 robber cut ☐  
 gully ☐  
 palaeochannel ☐  
 furrow ☐  
 field boundary ☐  
 burial cut ☐  
 other cut (describe below) ☐

### INTERPRETATION

[illegible]

### Basic process

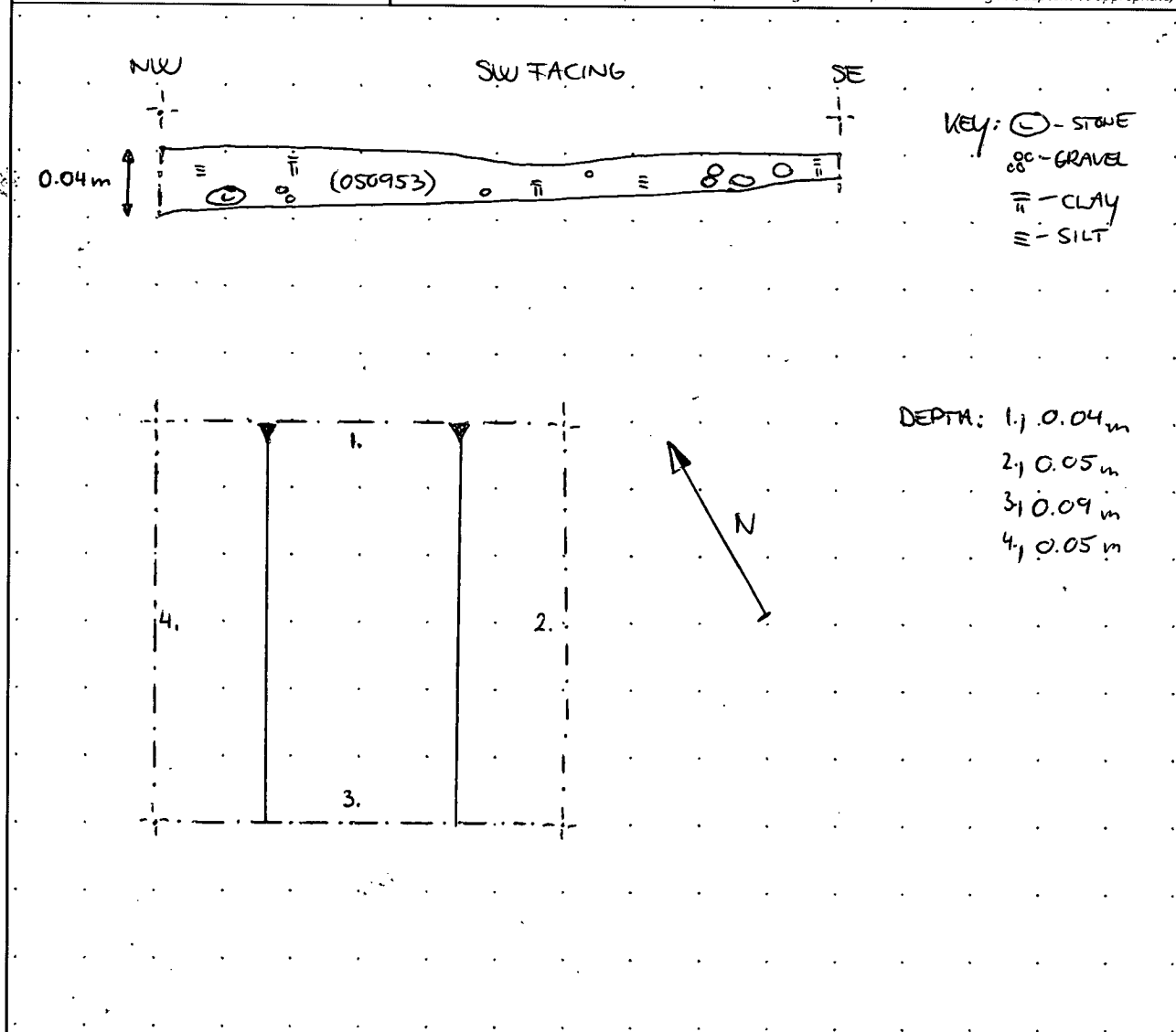
|                      |                |                      |                                                                                                                            |                                                                                                                                                                        |
|----------------------|----------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>S05116 | Finds nos<br>— | Photo nos<br>0500707 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/><br>Date 06/09/17<br>Initials P.T.<br>Checked by L. B. B. |
|----------------------|----------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

(050953) IS A SHALLOW DEPOSITION OF AN OCCUPATION LAYER. THERE ARE A FEW, POSSIBLY ROMAN, FRAGMENTED POTTERY, SHATTERED ANIMAL BONES AND CBM FOUND HERE. THIS <sup>DEPOSIT</sup> ~~FILL~~ IS GRAVELLY IN PATCHES. THIS DEPOSIT ALSO BECOMES DEEPER TOWARDS SW.

Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)





|                  |                     |                 |                                                                                                                        |
|------------------|---------------------|-----------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA05 | Sub-area/Trench | Context number<br>(050954)                                                                                             |
| ECB #            | Subgroup            | Parent context  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                                                                                   |  |  |                 |
|--|--|-----------------------------------------------------------------------------------|--|--|-----------------|
|  |  | (050002)                                                                          |  |  | Same as context |
|  |  | (050954)                                                                          |  |  | Cuts context    |
|  |  |  |  |  | Cut by context  |

CUT

(if you are using this section score out section **FILL/DEPOSIT** below)

## DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                 | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">  <input type="checkbox"/> vertical<br/>  <input type="checkbox"/> steep<br/>  <input type="checkbox"/> moderate<br/>  <input type="checkbox"/> gentle<br/>  <input type="checkbox"/> stepped<br/>  <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex         </div> <div style="font-size: 3em; margin: 0 10px;">}</div> <div>           sloping         </div> </div> | <b>Base</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">  <input type="checkbox"/> flat<br/>  <input type="checkbox"/> concave<br/>  <input type="checkbox"/> v-shaped<br/>  <input type="checkbox"/> sloping<br/>  <input type="checkbox"/> uneven<br/> <input type="checkbox"/> complex*         </div> </div> |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>Width</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

**FILL/DEPOSIT**

(if you are using this section score out section **CUT** above)

## DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input checked="" type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> <input type="checkbox"/> silt<br>sandy <input type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat<br>other* <input type="checkbox"/> |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b><br>0.10                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| stones*                                                                                                                                                                               | chalk                    | iron pan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | manganese                | charcoal                                                                                                                                                                                                                                                                                                                                                                                                          | plant remains*           | wood                     | marine shell             | bone*                               | pot                                 | fired clay / CBM                    | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| frequency                                                                                                                                                                             | O                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          | O                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                          |                          | O                                   | M                                   | O                                   |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

|                                     |                                     |
|-------------------------------------|-------------------------------------|
| topsoil                             | <input type="checkbox"/>            |
| subsoil                             | <input type="checkbox"/>            |
| geological subsoil                  | <input type="checkbox"/>            |
| remnant topsoil                     | <input type="checkbox"/>            |
| surface                             | <input type="checkbox"/>            |
| occupation layer                    | <input checked="" type="checkbox"/> |
| dumped layer                        | <input type="checkbox"/>            |
| deliberate backfill                 | <input type="checkbox"/>            |
| destruction debris                  | <input type="checkbox"/>            |
| bedding layer                       | <input type="checkbox"/>            |
| natural infilling                   | <input type="checkbox"/>            |
| colluvial layer                     | <input type="checkbox"/>            |
| in situ burning                     | <input type="checkbox"/>            |
| post-pipe                           | <input type="checkbox"/>            |
| packing                             | <input type="checkbox"/>            |
| cremation                           | <input checked="" type="checkbox"/> |
| other fill/deposit (describe below) | <input type="checkbox"/>            |

**Abandonment layer**

### CROSS REFERENCE

|                 |                                                |                      |                                                                                                                            |
|-----------------|------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>/ | Finds nos<br>F55907<br>F55908<br>/ sieve finds | Photo nos<br>0500713 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|-----------------|------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------|

Basic process  
construction ☐ use ☐ disuse ☒

Date 06/09/2011  
Initials RSR  
Checked by J.S.S.

# ADDITIONAL INFORMATION

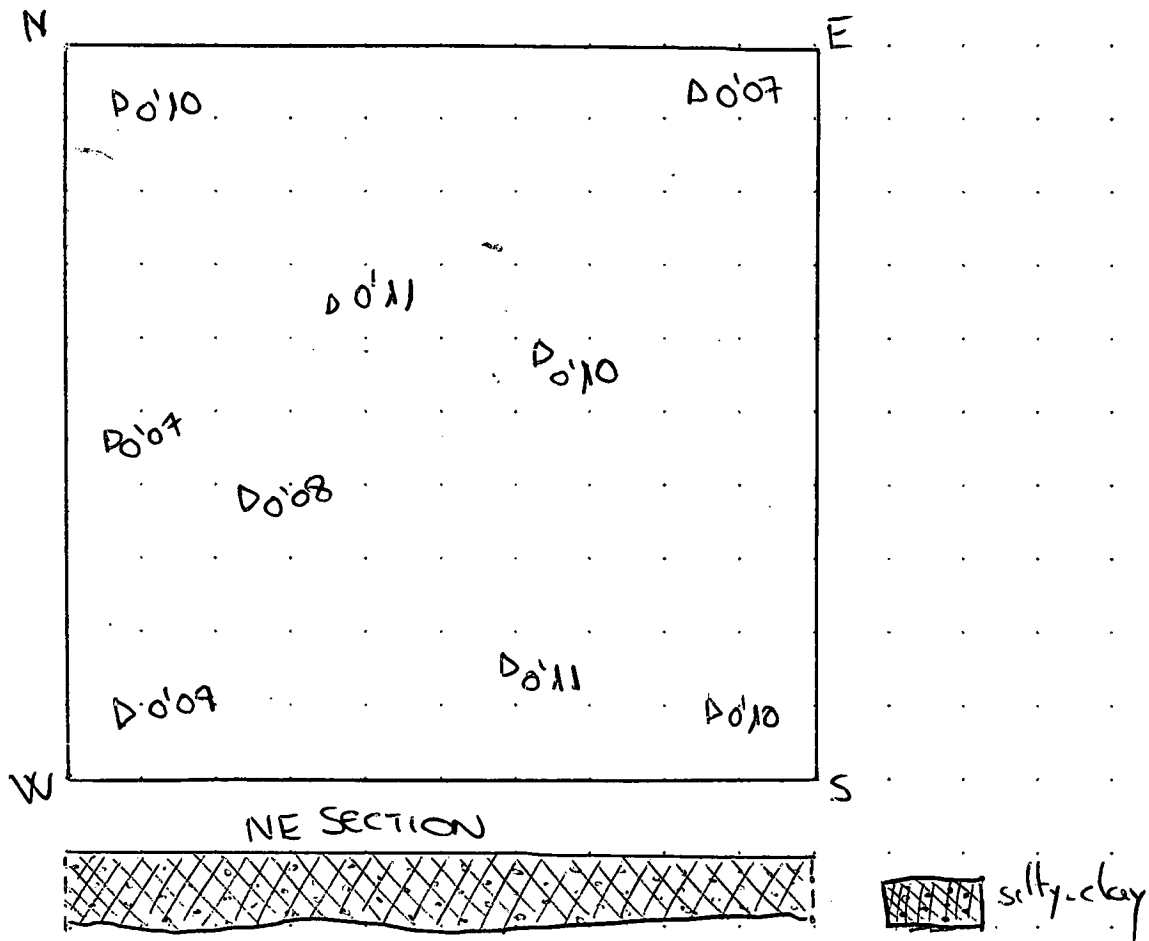
(give further details that may be important for understanding the context, including items marked \* overleaf)

Deposit (050954), part of the so-called "Dark Earth" Deposit where approx 0'10m of thick have been excavated. Basically this test pit seems to be on the NW border of the "Dark Earth" Deposit, explaining why we've only documented 0'10m. Regarding the inclusions, the majority of pot found are dated in Roman Late Period (late Antiquity), but also some pieces of common pottery (indeterm) have been documented, thus we cannot say 100% this layer was abandoned in some moment of the late Antiquity.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



## STRATIGRAPHY

|                                                                                   |                                                                                   |                                                                                   |                                                                                   |                                                                                    |                                                                                                     |
|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
|  |  |  |  |  | Same as context  |
|                                                                                   |                                                                                   |  |                                                                                   |                                                                                    | Cuts context     |
|  |  |  |  |  | Cut by context   |

(if you are using this section score out section **FILL/DEPOSIT** below)

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                   |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                   |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                    | <b>Sides.</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div>           sloping         </div> </div> |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br><input type="checkbox"/> design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>              |                                                                                                                                                                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                   |                 |

pit ☐  
 post-hole ☐  
 stake-hole ☐  
 ditch ☐  
 ring-ditch ☐  
 beam slot ☐  
 construction cut ☐  
 robber cut ☐  
 gully ☐  
 palaeochannel ☐  
 furrow ☐  
 field boundary ☐  
 burial cut ☐  
 other cut (describe below) ☐

(if you are using this section score out section **CUT** above)

### INTERPRETATION

[illegible]

### Basic process

|                     |           |           |                                                                                                             |                                                                                                               |
|---------------------|-----------|-----------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos          | Finds nos | Photo nos | Drawing nos                                                                                                 | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|                     |           | 0500712   | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |                                                                                                               |
| Date 6/19/17        |           |           |                                                                                                             | Initials BC                                                                                                   |
| Checked by J. B. S. |           |           |                                                                                                             |                                                                                                               |

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overlaid)

1m x 1m TPO18 THROUGH occupation layer.  
 TPO18 included deposit (050955) made up of  
 friable, loose, clay silt.  
 Deposit is shallow measuring only 50mm at  
 its max depth.  
 deposit included mod. small angular gravels,  
 x2 pottery frags, x2 A Bone frags.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

The sketch depicts a rectangular deposit on a grid. A horizontal line above the deposit is labeled '1.00m' with arrows pointing left towards 'NW' and right towards 'SE'. A vertical arrow to the left of the deposit indicates a depth of '50mm'. The deposit itself is a rectangle labeled '(050955)' with small circles inside representing gravel or pottery. Below the rectangle, the text '[TPO18]' is written.

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA5       | 1               | (05956)                                                                                                |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
| —         | —          | —               | cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|         |  |  |  |                 |   |
|---------|--|--|--|-----------------|---|
| Topsoil |  |  |  | Same as context | — |
| (05956) |  |  |  | Cuts context    | — |
| (05957) |  |  |  | Cut by context  | — |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam-slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                                                                                                       |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                         | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input checked="" type="checkbox"/> friable |  | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |  | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |  | <input type="checkbox"/> topsoil<br><input checked="" type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |
| <b>Thickness</b><br>0.25M                                                                                                                                                                        |  | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b>                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

### Basic process

|                                                                                                                          |           |           |                                                                                                                                               |
|--------------------------------------------------------------------------------------------------------------------------|-----------|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos                                                                                                               | Finds nos | Photo nos | Drawing nos                                                                                                                                   |
| 505123                                                                                                                   | /         | /         | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D#052247<br>D#05220 |
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |           |           |                                                                                                                                               |
| Date 10/10/14                                                                                                            |           |           |                                                                                                                                               |
| Initials SJE                                                                                                             |           |           |                                                                                                                                               |
| Checked by L.A.B.                                                                                                        |           |           |                                                                                                                                               |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

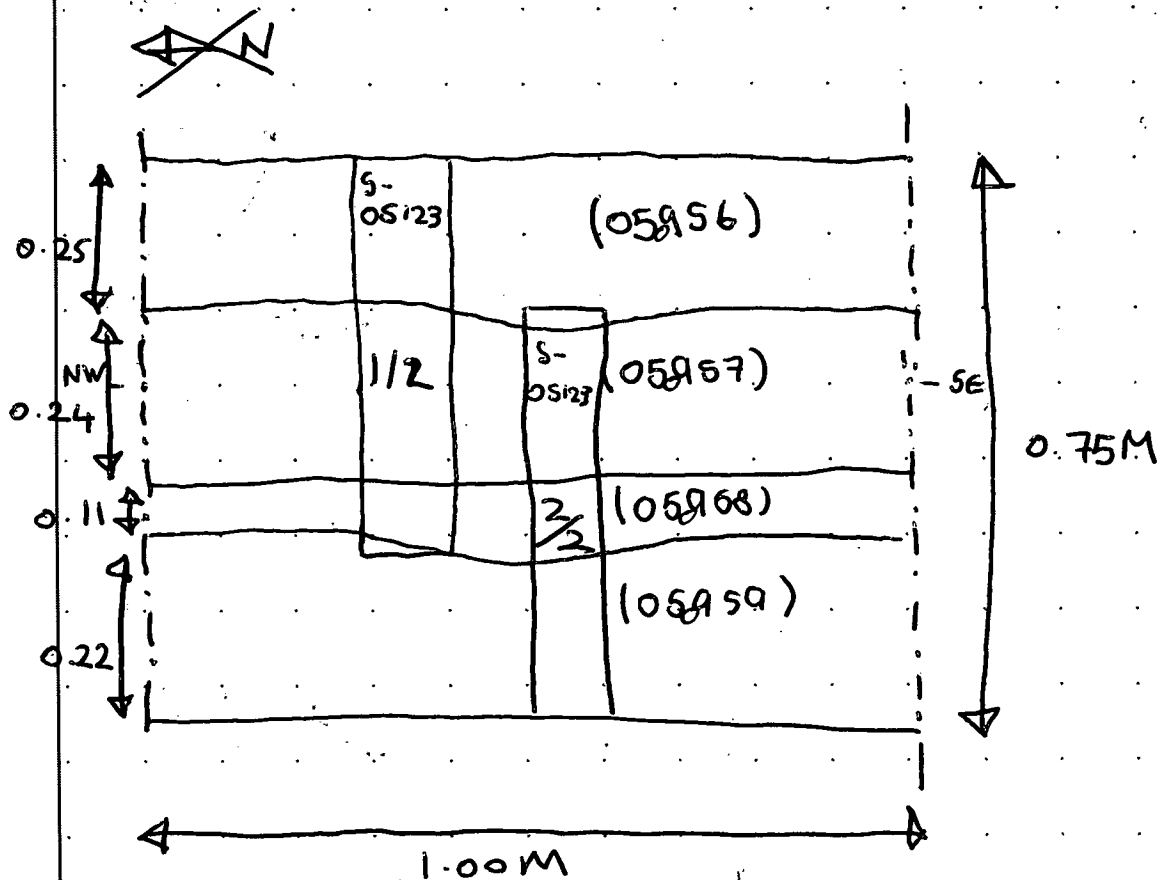
(any further details that may be important for understanding the context, including items marked \*overleaf)

Mid brownish grey silty clay. Olight Iron panning: Alluvial Sub  
Soil of South west facing Section of limit of Excavation

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



SW Facing Section of L.O.E

D#

W

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                           |                             |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>Tea5</b> | Sub-area/Trench<br><b>1</b> | Context number<br><b>(05857)</b>                                                                                       |
| ECB#<br>—               | Subgroup<br>—             | Parent context<br>—         | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|         |                 |   |
|---------|-----------------|---|
| (05856) | Same as context | — |
| (05857) | Cuts context    | — |
| (05858) | Cut by context  | — |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                 |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br>N                                                                                                                                  |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                         | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input checked="" type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input checked="" type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                          | topsoil <input type="checkbox"/><br>subsoil <input checked="" type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b><br><b>0.24m</b>                                                                                                                                                      |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                             | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                      | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## CROSS REFERENCE

## Basic process

|                             |                |                |                  |                                                                                                                                            |                                                                                                               |
|-----------------------------|----------------|----------------|------------------|--------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>505123</b> | Finds nos<br>— | Photo nos<br>— | Drawing nos<br>— | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D# 005220</b> | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|                             |                |                |                  | Date<br><b>10/10/17</b>                                                                                                                    |                                                                                                               |
|                             |                |                |                  | Initials<br><b>536</b>                                                                                                                     |                                                                                                               |
|                             |                |                |                  | Checked by<br><b>L.B.J.</b>                                                                                                                |                                                                                                               |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

light yellow brown silty clay, likely to be a burned OOI horizon based on iron panning above and below, Dry period.  
Some rooting

South west facing Section of limit of Excavation.

## SKETCHES

Refer to context (05956)

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)





**MOLA**  
MOLECULAR ORBITAL LASSER ANALYSIS

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA5       | AREA 1          | 05858                                                                                                  |
| ECR #     | Subgroup   | Parent context  | Context type                                                                                           |
| —         | —          | —               | cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |        |  |  |                 |   |
|--|--|--------|--|--|-----------------|---|
|  |  | 058157 |  |  | Same as context | — |
|  |  | 058158 |  |  | Cuts context    | — |
|  |  | 058159 |  |  | Cut by context  | — |

(if you are using this section score out section **FILL/DEPOSIT** below)

### DESCRIPTION

# INTERPRETATION

|                                                                                                                                                                                                                                                                                              |               |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br><input checked="" type="checkbox"/> N                                                                               |               | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b>                                                                                                                                                                                                                   |
| <b>Shape result of</b> (tick all that apply)<br><input type="checkbox"/> design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>              |               |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |

**FILL/DEPOSIT**

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

| Compaction                                                        |                                                                                                                                       | Colour                                                                   |                          | Composition                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------|---------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> | clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input checked="" type="checkbox"/> moderately compact            | brownish <input type="checkbox"/> <input type="checkbox"/> brown                                                                      | silty <input checked="" type="checkbox"/> <input type="checkbox"/> silt  |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    | greyish <input type="checkbox"/> <input checked="" type="checkbox"/> grey                                                             | sandy <input type="checkbox"/> <input type="checkbox"/> sand             |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input checked="" type="checkbox"/> friable                       | orangeish <input type="checkbox"/> <input type="checkbox"/> orange                                                                    | gravelly <input type="checkbox"/> <input type="checkbox"/> gravel        |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   | yellowish <input type="checkbox"/> <input type="checkbox"/> yellow                                                                    | peaty <input type="checkbox"/> <input type="checkbox"/> peat             |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   | reddish <input checked="" type="checkbox"/> <input type="checkbox"/> red                                                              |                                                                          |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   | blueish <input type="checkbox"/> <input type="checkbox"/> blue                                                                        |                                                                          |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                                                                                                                       |                                                                          |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.10m                                                             | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                         |                                                                          |                          | other* <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Inclusions                                                        |                                                                                                                                       |                                                                          |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                                                                                                               | chalk                                                                    | iron pan                 | manganese                       | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |                          |                          |
| frequency                                                         | O                                                                                                                                     | F                                                                        |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                         | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/>                                                 | <input type="checkbox"/> | <input type="checkbox"/>        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

topsoil ☐  
subsoil ☐  
geological subsoil ☐  
remnant topsoil ☐  
surface ☐  
occupation layer ☐  
dumped layer ☐  
deliberate backfill ☐  
destruction debris ☐  
bedding layer ☐  
natural infilling ☐  
colluvial layer ☒  
in situ burning ☐  
post-pipe ☐  
packing ☐  
cremation ☐  
other fill/deposit (describe below)

### CROSS REFERENCE

### Basic process

| Sample nos | Finds nos | Photo nos | Drawing nos                                                                                                                                              | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|------------|-----------|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| 505123     | /         | /         | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>052247<br>DH <del>055570</del> | Date 10/10/17<br>Initials BK<br>Checked by                                                                    |

This form is incomplete if fields marked with  are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \*overleaf)

Thin band of alluvial grey clay with freq. iron panning representing a flood event.

Recorded in section 3 column sampling in SW facing section of eastern L.O.E

Refer to context

05956

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

## STRATIGRAPHY

|  |  |       |  |  |                 |   |
|--|--|-------|--|--|-----------------|---|
|  |  | 05858 |  |  | Same as context | — |
|  |  | 05859 |  |  | Cuts context    | — |
|  |  |       |  |  | Cut by context  | — |

(if you are using this section score out section **FILL/DEPOSIT** below)

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br><input type="checkbox"/> N<br><input checked="" type="checkbox"/> S                                                            |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          |  | <b>Length</b>                                                                                                                                                                                                                                                                         | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      |
| <b>Diameter</b>                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |
| <b>Shape result of</b> (tick all that apply)<br><input type="checkbox"/> design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                         |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |

(If you are using this section score out section **CUT** above)

## INTERPRETATION

[illegible]

### Basic process

| Sample nos | Finds nos                                                                           | Photo nos                                                                           | Drawing nos                                                                                                                                              | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| 505123     |  |  | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>052247<br>D# <del>D06220</del> | Date: 10/10/17<br>Initials: BK<br>Checked by: L. A. B.                                                        |

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

DARK greyish brown 'DARK EARTH' horizon  
 with freq. stone nodules & freq. finds.  
 Recorded in section of SW facing section at  
 EASTERN L.O.E

Refer to context

05856

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA05      | AREA 1          | (050960)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
| —         |            | 050961          | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |   |                 |   |
|--|--|----------|--|---|-----------------|---|
|  |  | 050959   |  |   | Same as context | — |
|  |  | (050960) |  |   | Cuts context    | — |
|  |  | 050961   |  | 1 | Cut by context  | — |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Shape                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |
| Orientation                                                                                                                                                                                                                                                                  |  | Sides                                                                                                                                                                                                                                                                 |       | Base                                                                                                                                                                                                               |
| <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                                                                                                  |  | <input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |       | <input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| Dimensions                                                                                                                                                                                                                                                                   |  | Length                                                                                                                                                                                                                                                                | Width | Depth                                                                                                                                                                                                              |
| in metres                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |
| Shape result of: (tick all that apply)                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |
| design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                       |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |

|                                                     |
|-----------------------------------------------------|
| <input type="checkbox"/> pit                        |
| <input type="checkbox"/> post-hole                  |
| <input type="checkbox"/> stake-hole                 |
| <input type="checkbox"/> ditch                      |
| <input type="checkbox"/> ring-ditch                 |
| <input type="checkbox"/> beam slot                  |
| <input type="checkbox"/> construction cut           |
| <input type="checkbox"/> robber cut                 |
| <input type="checkbox"/> gully                      |
| <input type="checkbox"/> palaeochannel              |
| <input type="checkbox"/> furrow                     |
| <input type="checkbox"/> field boundary             |
| <input type="checkbox"/> burial cut                 |
| <input type="checkbox"/> other cut (describe below) |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          |                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Compaction                                                                                                                                                       |                          | Colour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          | Composition                                                                                                                                                                                                                                                                                                                                              |                                     |
| <input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |                          | clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                                     |
| Thickness                                                                                                                                                        |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                          |                                     |
| 0.19m                                                                                                                                                            |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                          |                                                                                                                                                                                                                                                                                                                                                          |                                     |
| Inclusions                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          |                                     |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                | charcoal                            |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          | plant remains*                      |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          | wood                                |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          | marine shell                        |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          | bone*                               |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          | pot                                 |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          | fired clay / CBM                    |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          | CTP                                 |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          | mortar/plaster                      |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          | leather/textile                     |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          | glass                               |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          | metal                               |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          | industrial waste                    |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          | lithics                             |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          | coarse stone                        |
| frequency                                                                                                                                                        | M                        | O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                          |                                     |
| bulk find                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> |

|                                                              |
|--------------------------------------------------------------|
| <input type="checkbox"/> topsoil                             |
| <input type="checkbox"/> subsoil                             |
| <input type="checkbox"/> geological subsoil                  |
| <input type="checkbox"/> remnant topsoil                     |
| <input type="checkbox"/> surface                             |
| <input type="checkbox"/> occupation layer                    |
| <input type="checkbox"/> dumped layer                        |
| <input type="checkbox"/> deliberate backfill                 |
| <input type="checkbox"/> destruction debris                  |
| <input type="checkbox"/> bedding layer                       |
| <input checked="" type="checkbox"/> natural infilling        |
| <input type="checkbox"/> colluvial layer                     |
| <input type="checkbox"/> in situ burning                     |
| <input type="checkbox"/> post-pipe                           |
| <input type="checkbox"/> packing                             |
| <input type="checkbox"/> cremation                           |
| <input type="checkbox"/> other fill/deposit (describe below) |

### CROSS REFERENCE

### Basic process

|                                       |                              |                                            |
|---------------------------------------|------------------------------|--------------------------------------------|
| construction <input type="checkbox"/> | use <input type="checkbox"/> | disuse <input checked="" type="checkbox"/> |
|---------------------------------------|------------------------------|--------------------------------------------|

|            |           |                                  |                                                                                                                                  |
|------------|-----------|----------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                        | Drawing nos                                                                                                                      |
|            | F53329    | 0500879<br>-883<br>0502661<br>65 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>005127 |

|            |          |
|------------|----------|
| Date       | 11/10/17 |
| Initials   | BC       |
| Checked by | DH       |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

Single, silty clay fill at NW-SE aligned  
Gully [050960]

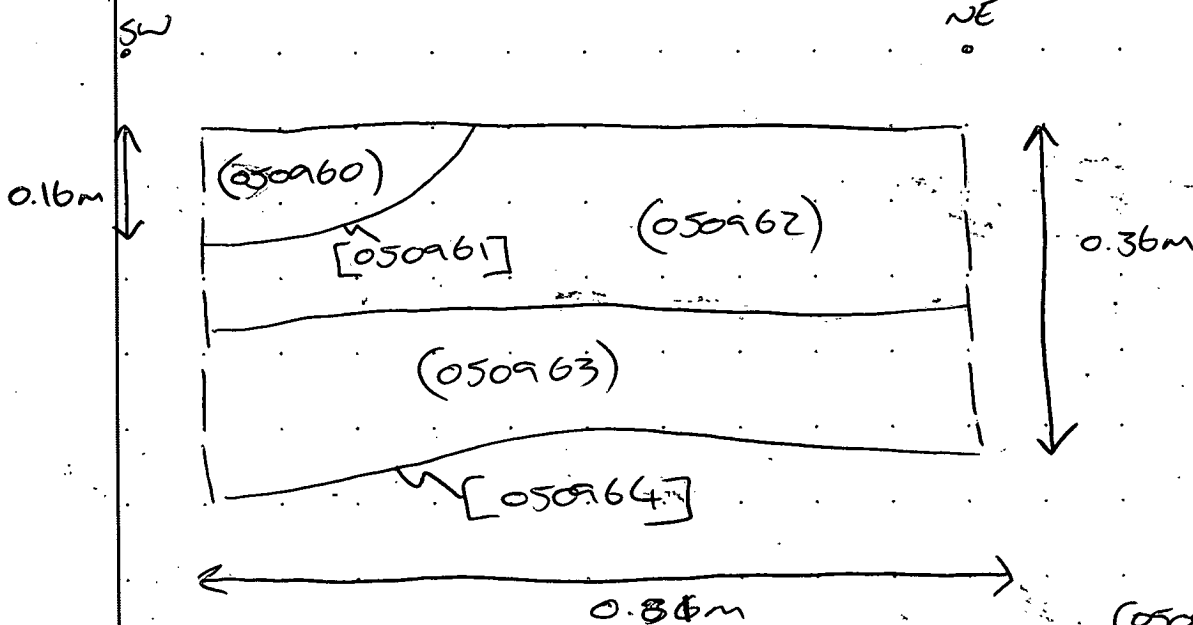
Deposited by natural infilling.

One Roman ~~tile~~ <sup>brick</sup>, one potsherd probably Roman  
and one Re object were found after the  
extension of the slot

Refer to context 050964 - PLAN

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

SKETCHES



Sketch section at gully  
[050961] & ditch [050964]

(050959)  
|  
(050960)  
|  
[050961]  
|  
(050962)  
|  
(050963)  
|  
[050964]  
|  
(050003)



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub area/trench | Context number                                                                                         |
| A14       | T.2A05     | AREA 1          | 050961                                                                                                 |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
| —         | —          | 050961          | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |        |  |  |                 |        |
|--|--|--------|--|--|-----------------|--------|
|  |  | 050960 |  |  | Same as context | —      |
|  |  | 050961 |  |  | Cuts context    | 050962 |
|  |  | 050962 |  |  | Cut by context  | —      |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                                  |                       |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                  |                       |                                                                                                                                                                                                                                              | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input checked="" type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input checked="" type="checkbox"/> NW-SE                                                                                                                                       |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input checked="" type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |                       | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          |  | <b>Length</b><br>7.3m                                                                                                                                                                                                                                                                            | <b>Width</b><br>0.39m | <b>Depth</b><br>0.16m                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                                  |                       |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                                  |                       |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                            |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------|--------------|-------|-----|------------------|-----|----------------|-----------------|-------|-------|------------------|---------|--------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |        | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |          | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |          | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                          |        | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                     |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| frequency                                                                                                                                                                  | tones* | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | iron pan | manganese                                                                                                                                                                                                                                                                                                                                                | charcoal |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | plant remains* | wood | marine shell | bone* | pot | fired clay / CBM | CTP | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone |
| bulk find                                                                                                                                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |

## CROSS REFERENCE

## Basic process

construction ☒ use ☒ disuse ☐

|            |           |                                   |                                                                                                                                  |
|------------|-----------|-----------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                         | Drawing nos                                                                                                                      |
| —          | —         | 0500879<br>— 884<br>0502666<br>65 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05127 |

|            |          |
|------------|----------|
| Date       | 11/10/17 |
| Initials   | BLK      |
| Checked by | DH       |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Shallow cut at NW-SE aligned gully  
[050961]

cuts earlier NE-SW aligned ditch  
[050964]

Possibly part of an overall drainage system

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

(050960) - section  
[050964] - plan



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A.4       | TEA 5      | AREA 1          | (050962)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
| —         | —          | 050964          | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |        |
|--|--|----------|--|--|-----------------|--------|
|  |  | 050961   |  |  | Same as context | —      |
|  |  | (050962) |  |  | Cuts context    | —      |
|  |  | 050963   |  |  | Cut by context  | 050961 |

### CUT

(if you are using this section score out section **FILL/DEPOSIT** below)

### DESCRIPTION

Shape

sub- ☐ rectangular ☐ square ☐ circular ☐ linear ☐ curvilinear ☐ irregular ☐ other\* ☐

Orientation

I ☐ N-S  
☐ E-W  
☐ NE-SW  
☐ NW-SE

Sides

1 ☐ vertical  
☐ steep  
☐ moderate sloping  
☐ gentle  
☐ stepped  
☐ undercutting  
☐ complex\*

Base

1 ☐ flat  
☐ concave  
☐ v-shaped  
☐ sloping  
☐ uneven  
☐ complex\*

Dimensions

Length Width Depth Diameter

in metres

Shape result of (tick all that apply)

design ☐ material cut into ☐ natural processes ☐ degree of truncation ☐ uncertain ☐

### INTERPRETATION

pit ☐  
 post-hole ☐  
 stake-hole ☐  
 ditch ☐  
 ring-ditch ☐  
 beam-slot ☐  
 construction cut ☐  
 robber-cut ☐  
 gully ☐  
 palaeochannel ☐  
 furrow ☐  
 field boundary ☐  
 burial cut ☐  
 other cut (describe below) ☐

### FILL/DEPOSIT

(if you are using this section score out section **CUT** above)

### DESCRIPTION

Compaction

☐ compact  
☒ moderately compact  
☐ loose  
☐ friable

Colour

light ☐ mid ☒ dark ☐ mottled ☐

brownish ☐ brown ☒  
 greyish ☒ grey ☐  
 orangeish ☐ orange ☐  
 yellowish ☐ yellow ☐  
 reddish ☐ red ☐  
 blueish ☐ blue ☐

Composition

clayey ☒ clay ☐  
 silty ☐ silt ☒  
 sandy ☐ sand ☐  
 gravelly ☐ gravel ☐  
 peaty ☐ peat ☐

Thickness

0.31m black ☐ white ☐ other\* ☐

Inclusions

use the following:  
 O: occasional  
 M: moderate  
 F: frequent

stones\* chalk iron pan manganese charcoal plant remains\* wood marine shell bone\* pot fired clay / CBM CTP mortar/plaster leather/textile glass metal industrial waste lithics coarse stone

frequency

bulk find ☐

### INTERPRETATION

topsoil ☐  
 subsoil ☐  
 geological subsoil ☐  
 remnant topsoil ☐  
 surface ☐  
 occupation layer ☐  
 dumped layer ☐  
 deliberate backfill ☐  
 destruction debris ☐  
 bedding layer ☐  
 natural infilling ☐  
 colluvial layer ☐  
 in situ burning ☐  
 post-pipe ☐  
 packing ☐  
 cremation ☐  
 other fill/deposit (describe below) ☐

### CROSS REFERENCE

|            |           |                              |                                                                                                                        |
|------------|-----------|------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                    | Drawing nos                                                                                                            |
| —          | —         | 0500879<br>— 884<br>05096165 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |

### Basic process

construction ☐ use ☐ disuse ☒

Date 11/10/17

Initials SK

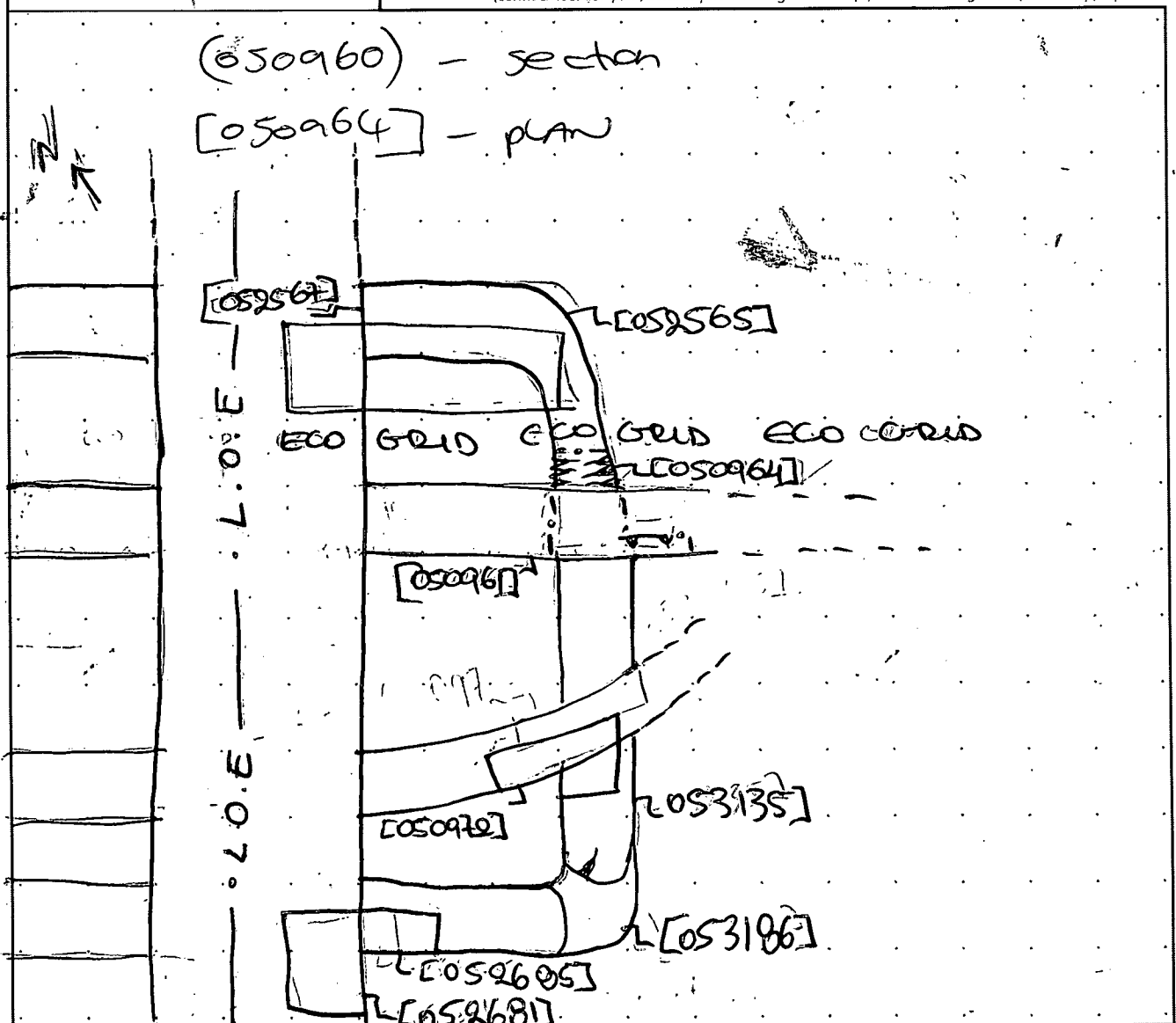
Checked by DM

UPPER / Secondary Fill of NE-SW Aligned  
Ditch [050964]  
incl. mod small Angular gravels, occ  
chalk flecks, occ pottery frags (x4)

Refer to context

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)





|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEAS       | AREA 1          | 050963                                                                                                 |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
| —         |            | 050964          | cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |        |  |  |                 |   |
|--|--|--------|--|--|-----------------|---|
|  |  | 050962 |  |  | Same as context | — |
|  |  | 050963 |  |  | Cuts context    | — |
|  |  | 050964 |  |  | Cut by context  | — |

(if you are using this section score out section **FILL/DEPOSIT** below)

### DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                       |        |                                                                                                                                                                                                                                                                                                                 |       |                                                                                                                                                                                                                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Shape<br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |        |                                                                                                                                                                                                                                                                                                                 |       |                                                                                                                                                                                                                                                           |
| Orientation<br><div> <input type="checkbox"/> N-S<br/> <input type="checkbox"/> E-W<br/> <input type="checkbox"/> NE-SW<br/> <input type="checkbox"/> NW-SE         </div> <div> </div>                                                                                               |        | Sides<br><div> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> sloping |       | Base<br><div> <input type="checkbox"/> flat<br/> <input type="checkbox"/> concave<br/> <input type="checkbox"/> v-shaped<br/> <input type="checkbox"/> sloping<br/> <input type="checkbox"/> uneven<br/> <input type="checkbox"/> complex*         </div> |
| Dimensions<br>in metres                                                                                                                                                                                                                                                               | Length | Width                                                                                                                                                                                                                                                                                                           | Depth | Diameter                                                                                                                                                                                                                                                  |
| Shape result of (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |        |                                                                                                                                                                                                                                                                                                                 |       |                                                                                                                                                                                                                                                           |

pit ☐  
 post-hole ☐  
 stake-hole ☐  
 ditch ☐  
 ring-ditch ☐  
 beam slot ☐  
 construction cut ☐  
 robber cut ☐  
 gully ☐  
 palaeochannel ☐  
 furrow ☐  
 field boundary ☐  
 burial cut ☐  
 other cut (describe below) ☐

**FILL/DEPOSIT**

(If you are using this section score out section **CUT** above)

## DESCRIPTION

# INTERPRETATION

[illegible]

### CROSS REFERENCE

### Basic process

| Sample nos.                                                                         | Finds nos.                                                                          | Photo nos.                      | Drawing nos.                                                                                                                     | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
|  |  | 0300879<br>- 8813<br>0502661-65 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>005127 | Date 11/10/17<br>Initials J<br>Checked by L. N.                                                               |

This form is incomplete, if fields marked with  are empty. PTO for additional information (and describing all items marked with \*) and sketches

PRIMARY Fill of NE - SW aligned ditch

[050964]

included mod. small angular gavel, occ. chalk  
 Flecks & Freq. IRON PANNING suggesting possible  
 drainage ditch AS INDICATIVE of WATER  
 MOVEMENT

Refer to context

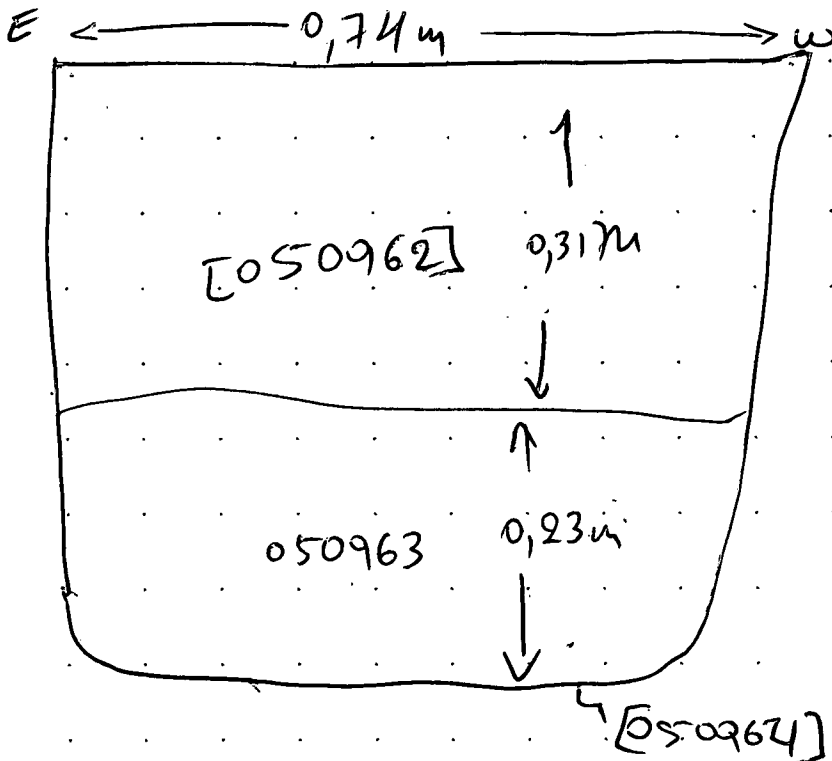
(050960)

Section

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

[050964] plan



# MOLA HEADLAND INFRASTRUCTURE

# CONTEXT SHEET



|                         |                           |                                 |                                                                                                                        |
|-------------------------|---------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/field<br><b>TEAS</b> | Sub-area/tench<br><b>AREA 1</b> | Context number<br><b>050964</b>                                                                                        |
| Fill<br><b>—</b>        | Subgroup<br><b>—</b>      | Parent context<br><b>050964</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                                               |
|--|--|---------------|--|--|-----------------------------------------------|
|  |  | <b>050963</b> |  |  | Same as context <b>1053135</b> <b>1053186</b> |
|  |  | <b>050964</b> |  |  | Cuts context <b>1052565</b> <b>1052685</b>    |
|  |  | <b>050063</b> |  |  | Cut by context <b>—</b>                       |

## CUT

(If you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                  |              |                                                                                                                                                                                                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Shape                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                  |              |                                                                                                                                                                                                                               |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                  |              |                                                                                                                                                                                                                               |
| Orientation                                                                                                                                                                                                                                                                             |  | Sides                                                                                                                                                                                                                                                                            |              | Base                                                                                                                                                                                                                          |
| <input checked="" type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                                                                                                             |  | <input checked="" type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <input checked="" type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| Dimensions                                                                                                                                                                                                                                                                              |  | Length                                                                                                                                                                                                                                                                           | Width        | Depth                                                                                                                                                                                                                         |
| in metres                                                                                                                                                                                                                                                                               |  | <b>&gt; 3m</b>                                                                                                                                                                                                                                                                   | <b>0.74m</b> | <b>0.52m</b>                                                                                                                                                                                                                  |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                  |              |                                                                                                                                                                                                                               |
| design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                       |  |                                                                                                                                                                                                                                                                                  |              |                                                                                                                                                                                                                               |

|                                                     |
|-----------------------------------------------------|
| pit <input type="checkbox"/>                        |
| post-hole <input type="checkbox"/>                  |
| stake-hole <input type="checkbox"/>                 |
| ditch <input checked="" type="checkbox"/>           |
| ring-ditch <input type="checkbox"/>                 |
| beam slot <input type="checkbox"/>                  |
| construction cut <input type="checkbox"/>           |
| robber cut <input type="checkbox"/>                 |
| gully <input type="checkbox"/>                      |
| palaeochannel <input type="checkbox"/>              |
| furrow <input type="checkbox"/>                     |
| field boundary <input type="checkbox"/>             |
| burial cut <input type="checkbox"/>                 |
| other cut (describe below) <input type="checkbox"/> |

## FILL/DEPOSIT

(If you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    |                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| Compaction                                                                                                                                                       |         | Colour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |          | Composition                                                                                                                                                                                                                                                                                                                        |                  |
| <input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input checked="" type="checkbox"/> loose<br><input type="checkbox"/> friable |         | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |          | clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                  |
| Thickness                                                                                                                                                        |         | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                    |                  |
| Inclusions                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    |                  |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                | stones* | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | iron pan | manganese                                                                                                                                                                                                                                                                                                                          | charcoal         |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | plant remains*   |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | wood             |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | marine shell     |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | bone*            |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | pot              |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | fired clay / CBM |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | CTP              |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | mortar/plaster   |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | leather/textile  |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | glass            |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | metal            |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | industrial waste |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | lithics          |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | coarse stone     |
| frequency                                                                                                                                                        |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    |                  |
| bulk find                                                                                                                                                        |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    |                  |

|                                                              |
|--------------------------------------------------------------|
| topsoil <input type="checkbox"/>                             |
| subsoil <input type="checkbox"/>                             |
| geological subsoil <input type="checkbox"/>                  |
| remnant topsoil <input type="checkbox"/>                     |
| surface <input type="checkbox"/>                             |
| occupation layer <input type="checkbox"/>                    |
| dumped layer <input type="checkbox"/>                        |
| deliberate backfill <input type="checkbox"/>                 |
| destruction debris <input type="checkbox"/>                  |
| bedding layer <input type="checkbox"/>                       |
| natural infilling <input type="checkbox"/>                   |
| colluvial layer <input type="checkbox"/>                     |
| in situ burning <input type="checkbox"/>                     |
| post-pipe <input type="checkbox"/>                           |
| packing <input type="checkbox"/>                             |
| cremation <input type="checkbox"/>                           |
| other fill/deposit (describe below) <input type="checkbox"/> |

## CROSS REFERENCE

## Basic process

|                                                  |                              |                                 |
|--------------------------------------------------|------------------------------|---------------------------------|
| construction <input checked="" type="checkbox"/> | use <input type="checkbox"/> | disuse <input type="checkbox"/> |
|--------------------------------------------------|------------------------------|---------------------------------|

|            |           |                                                  |                                                                                                                                         |
|------------|-----------|--------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                        | Drawing nos                                                                                                                             |
|            |           | <b>0500879</b><br><b>-884</b><br><b>05006965</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>005127</b> |

|            |                 |
|------------|-----------------|
| Date       | <b>11/10/17</b> |
| Initials   | <b>BC</b>       |
| Checked by | <b>DH</b>       |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

cut at NE-SW aligned ditch [050964]  
 cut by NW-SE aligned gully [050961]  
 POSSIBLE DRAINAGE DITCH AS LOWER / PRIMARY  
 FILL (050963) including Reg. iron panning  
 - indicative of water movement

Extension of the slot revealed the profile of the ditch  
 We assume that belongs in the same system ditch  
 that forms an rectangular enclosure.

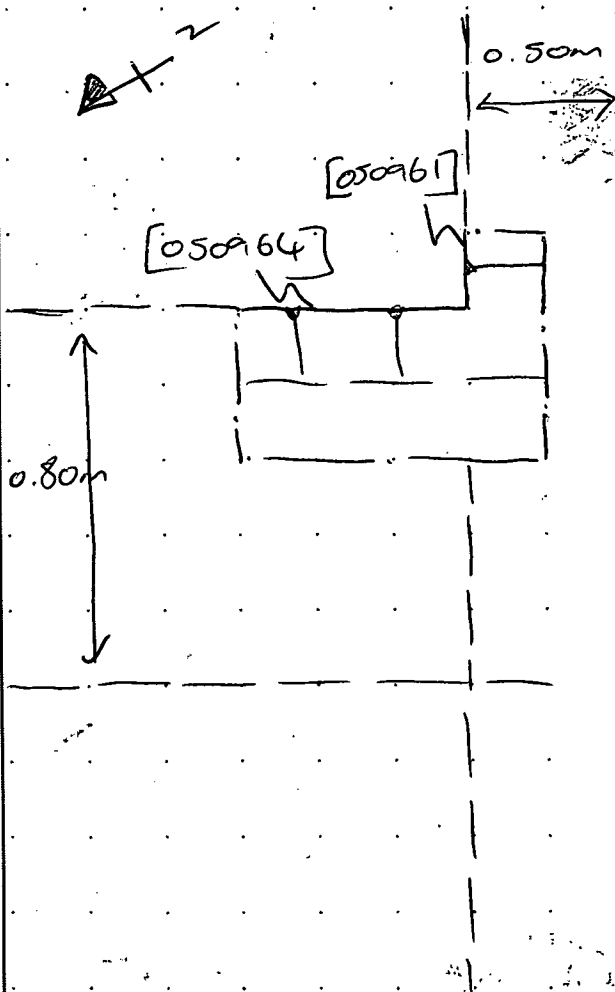
for plan see (050962)  
 for section see (050963)

Refer to context 050960

section

SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



Sketch plan of gully [050961] truncating ditch [050964]








|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA 05     | 1               | (050965)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | 1050966         | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY.

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (050959) |  |  | Same as context |
|  |  | (050965) |  |  | Cuts context    |
|  |  | (050981) |  |  | Cut by context  |

(if you are using this section score out section **FILL/DEPOSIT** below)

# INTERPRETATION

|                                                                                                                                                                                                                                                                              |        |                                                                                                                                                                                                                                                              |       |                                                                                                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Shape                                                                                                                                                                                                                                                                        |        |                                                                                                                                                                                                                                                              |       |                                                                                                                                                                                                                    |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |        |                                                                                                                                                                                                                                                              |       |                                                                                                                                                                                                                    |
| Orientation                                                                                                                                                                                                                                                                  |        | Sides                                                                                                                                                                                                                                                        |       | Base                                                                                                                                                                                                               |
|  <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                           |        | <input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex |       | <input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| Dimensions                                                                                                                                                                                                                                                                   | Length | Width                                                                                                                                                                                                                                                        | Depth | Diameter                                                                                                                                                                                                           |
| in metres                                                                                                                                                                                                                                                                    |        |                                                                                                                                                                                                                                                              |       |                                                                                                                                                                                                                    |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                        |        |                                                                                                                                                                                                                                                              |       |                                                                                                                                                                                                                    |
| design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                       |        |                                                                                                                                                                                                                                                              |       |                                                                                                                                                                                                                    |

(If you are using this section score out section CUT above):

## INTERPRETATION

|                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> <input type="checkbox"/> brown<br>greyish <input type="checkbox"/> <input checked="" type="checkbox"/> grey<br>orangeish <input type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> <input checked="" type="checkbox"/> red<br>blueish <input checked="" type="checkbox"/> <input type="checkbox"/> blue |                          | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> <input type="checkbox"/> silt<br>sandy <input type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <b>Thickness</b><br>0.41 m                                                                                                                                                            |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| <b>Inclusions</b>                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                     | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                      | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                               | pot                                 | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                               | industrial waste         | lithics                  | coarse stone             |                          |                          |
| frequency                                                                                                                                                                             | O                        | M                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                | O                        |                          |                          |                          | M                                   | O                                   | O                        |                          |                          |                          |                          | O                                   |                          |                          |                          |                          |                          |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### Basic process

| Sample nos. | Finds nos. | Photo nos.                               | Drawing nos.                                                                                                                     | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|-------------|------------|------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
|             |            | 0500885<br><del>0500891</del><br>0500891 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05130 | Date 12/10/17<br>Initials S.O.S.<br>Checked by L.B.B.                                                         |

This form is incomplete if fields marked with  are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

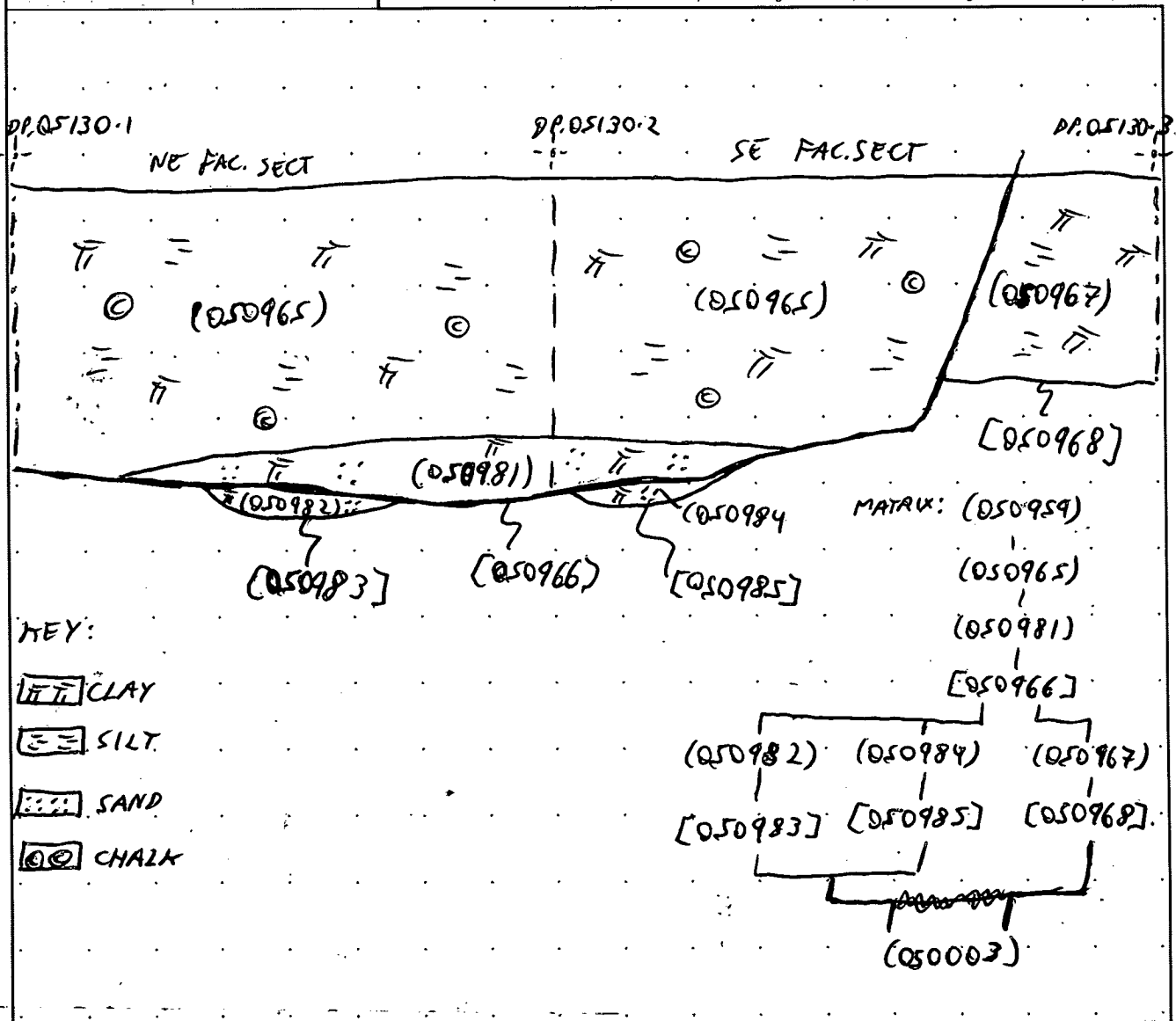
(any further details that may be important for understanding the context, including items marked \* overleaf)

Fill (050965) of Ditch [050966]. This is the latest fill of this ditch, located above fill (050981). It is a bit dark silty clay and has a considerable amount of inclusions: It has some medium-size stones, some charcoals, quite chalk, a piece of CBM, some fragments of Roman pottery, big fragments of animal bones and a piece of slag. This context could be an slow deposition of organic materials and other wastes and sediments due to a dragging process.

Refer to context [050966] For Plan

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)





## STRATIGRAPHY

|  |          |          |          |  |                 |                               |
|--|----------|----------|----------|--|-----------------|-------------------------------|
|  |          | (050981) |          |  | Same as context |                               |
|  |          | (050966) |          |  | Cuts context    | (050967)<br>(050982) (050984) |
|  | (050967) | (050982) | (050984) |  | Cut by context  |                               |

(if you are using this section score out section **FILL/DEPOSIT** below)

## INTERPRETATION

|                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Shape                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Orientation                                                                                                                                                                                                                                                                             |  | Sides                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       | Base                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input checked="" type="checkbox"/> NW-SE                                            |  |  <input type="checkbox"/> vertical<br> <input checked="" type="checkbox"/> steep<br> <input type="checkbox"/> moderate<br> <input type="checkbox"/> gentle<br> <input type="checkbox"/> stepped<br> <input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |       |  <input type="checkbox"/> flat<br> <input checked="" type="checkbox"/> concave<br> <input type="checkbox"/> v-shaped<br> <input type="checkbox"/> sloping<br> <input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| Dimensions                                                                                                                                                                                                                                                                              |  | Length                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Width | Depth                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| in metres                                                                                                                                                                                                                                                                               |  | 1.34                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 1.18  | 0.41                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |

(if you are using this section score out section CUT above)

## INTERPRETATION

| <i><b>Compaction</b></i>                    |  | <i><b>Colour</b></i>                                                                                                       |                                 | <i><b>Composition</b></i>       |                                   |                                 |
|---------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------|---------------------------------|---------------------------------|-----------------------------------|---------------------------------|
| <input type="checkbox"/> compact            |  | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> |                                 | clayey <input type="checkbox"/> | <input type="checkbox"/> clay     |                                 |
| <input type="checkbox"/> moderately compact |  | brownish <input type="checkbox"/>                                                                                          |                                 | <input type="checkbox"/> brown  | silty <input type="checkbox"/>    | <input type="checkbox"/> silt   |
| <input checked="" type="checkbox"/> loose   |  | greyish <input type="checkbox"/>                                                                                           |                                 | <input type="checkbox"/> grey   | sandy <input type="checkbox"/>    | <input type="checkbox"/> sand   |
| <input type="checkbox"/> friable            |  | orangeish <input type="checkbox"/>                                                                                         |                                 | <input type="checkbox"/> orange | gravelly <input type="checkbox"/> | <input type="checkbox"/> gravel |
|                                             |  | yellowish <input type="checkbox"/>                                                                                         |                                 | <input type="checkbox"/> yellow | peaty <input type="checkbox"/>    | <input type="checkbox"/> peat   |
|                                             |  | reddish <input type="checkbox"/>                                                                                           | <input type="checkbox"/> red    |                                 |                                   |                                 |
|                                             |  | blueish <input type="checkbox"/>                                                                                           | <input type="checkbox"/> blue   |                                 |                                   |                                 |
|                                             |  | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                              | other* <input type="checkbox"/> |                                 |                                   |                                 |

| <i><b>Inclusions</b></i>                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                  | chalk                    | iron pan                 | manganese                | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |                          |                          |
| frequency                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

other fill/deposit (describe below) \_\_\_\_\_

### Basic process

| Sample nos | Finds nos | Photo nos                                      | Drawing nos                                                                                                                      | construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
|------------|-----------|------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
|            |           | 0500885<br>to<br><del>0500890</del><br>0500891 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>005130 | Date 12/10/1<br>Initials J.O.S.<br>Checked by L.B.B.                                                          |

# ADDITIONAL INFORMATION

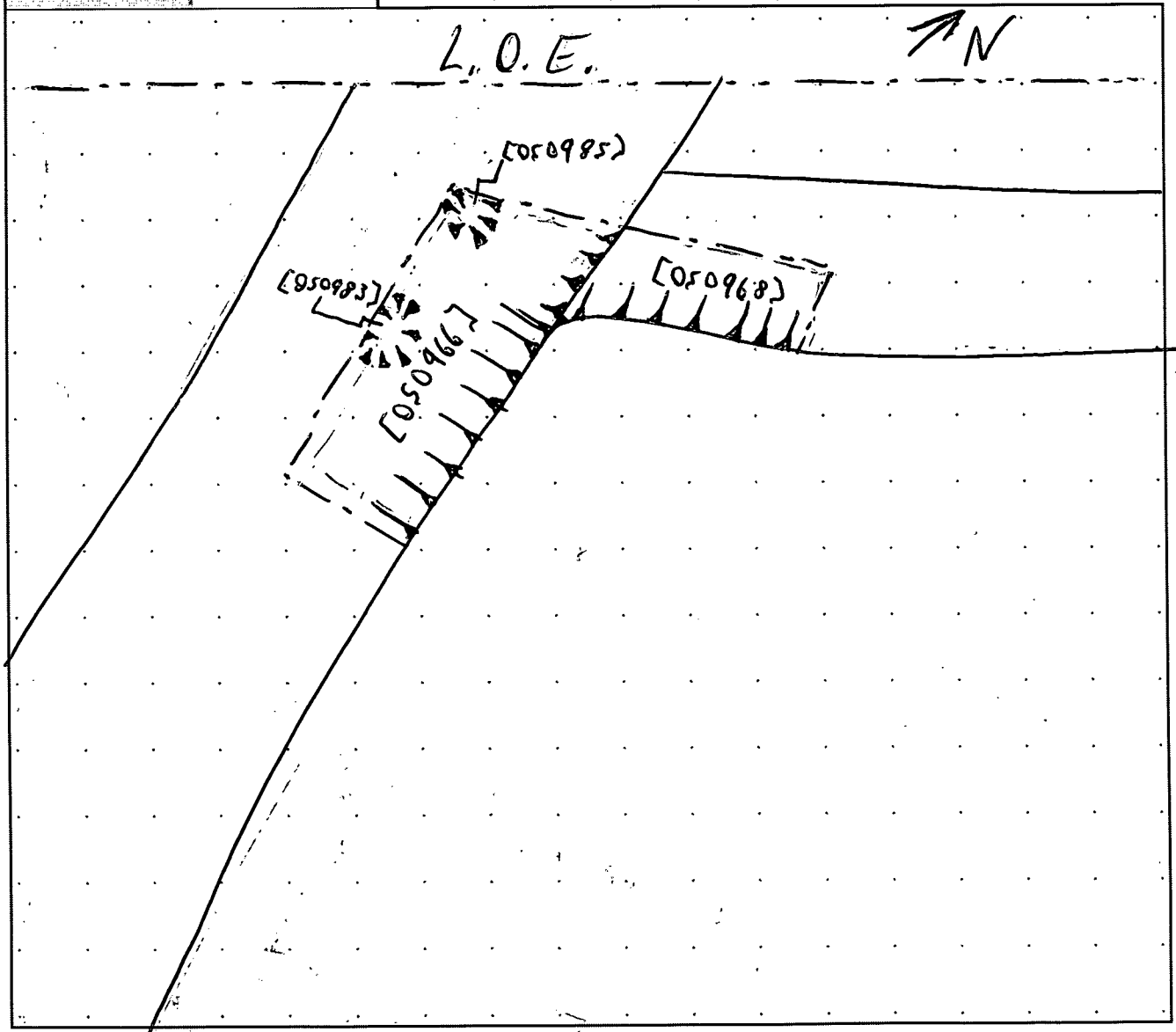
(any further details that may be important for understanding the context, including items marked \* overleaf)

Cut [050966] of Ditch. This ditch comes from NW, where the L.O.E. is, to the SE, and at this point is cutting the fill (050967) of the gully [050968]. This ditch is filled by contexts (050965) and (050981). In the base of the ditch there are two very shallow circular holes. These holes ~~have been~~ have been denominated as post-holes: [050983] and [050985]; however they could be just the result of an erosion process. This ditch could be part of an enclosure system, which would be subsequent to the draining <sup>a Roman</sup> system formed by the gully [050968].

Refer to context: (050965) for section

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)





**MOLA**  
**HEADLAND**  
**ARCHAEOLOGY**

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA05      | 1               | (Q50967)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | (Q50968)        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                         |
|--|--|----------|--|--|-------------------------|
|  |  | [050966] |  |  | Same as context         |
|  |  | [050967] |  |  | Cuts context            |
|  |  | [050968] |  |  | Cut by context [050966] |

(if you are using this section score out section **FILL/DEPOSIT** below)

# INTERPRETATION

|                                                                                                                                                                                                                                                                                              |               |                                                                                                                                                                                                                                                                               |              |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                               |              |                 |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br>N<br>                                         |               | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              |                 |
|                                                                                                                                                                                                                                                                                              |               | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex*                                             |              |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |
| <b>Shape result of</b> <input type="checkbox"/> natural <input type="checkbox"/> man-made                                                                                                                                                                                                    |               |                                                                                                                                                                                                                                                                               |              |                 |
| design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                       |               |                                                                                                                                                                                                                                                                               |              |                 |

(if you are using this section score out section CUT above)

## INTERPRETATION

| Compaction                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Colour                                                                                                                                                                                                                                                                                                                                                   |                          | Composition                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input checked="" type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness<br>0.29                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                            |                          | other* <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Inclusions                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                          |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                | stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | chalk                                                                                                                                                                                                                                                                                                                                                    | iron pan                 | manganese                       | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| frequency                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                          |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                                                                                                                        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/>        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

topsoil ☐  
subsoil ☐  
geological subsoil ☐  
remnant topsoil ☐  
surface ☐  
occupation layer ☐  
dumped layer ☐  
deliberate backfill ☐  
destruction debris ☐  
bedding layer ☐  
natural infilling ☒  
colluvial layer ☐  
in situ burning ☐  
post-pipe ☐  
packing ☐  
cremation ☐  
other fill/deposit (describe below)

### Basic process

|                                                                                     |                                                                                     |                                   |                                                                                                                                  |                                                                                                                 |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| Sample nos.                                                                         | Finds nos.                                                                          | Photo nos.                        | Drawing nos.                                                                                                                     | construction <input type="checkbox"/> use <input type="checkbox"/> edit use <input checked="" type="checkbox"/> |
|  |  | 050088\$<br>0500889 To<br>0500893 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05130 | Date 12/10/17<br>Initials J.O.S.<br>Checked by L.B.D.                                                           |

This form is incomplete if fields marked with ☐ are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Fill (050968) of Gully [050968]. This is the only fill of that gully; it has a silty clay composition with no finds in it. This fill is being cut by ditch [050966].

It is probably the result of a natural deposition made by an alluvial process once the gully fell into disuse.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

(050965) For section  
[050966] For plan

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 05</b> | Sub-area/Trench<br><b>1</b>       | Context number<br><b>[050968]</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context<br><b>[050968]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                              |
|--|--|-----------------|--|--|------------------------------|
|  |  | <b>[050967]</b> |  |  | Same as context              |
|  |  | <b>[050968]</b> |  |  | Cuts context <b>(050003)</b> |
|  |  | <b>(050003)</b> |  |  | Cut by context               |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                                  |                             |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                  |                             |                                                                                                                                                                                                                                              | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input checked="" type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br><input checked="" type="checkbox"/> N                                                                                          |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input checked="" type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |                             | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          |  | <b>Length</b><br><b>0.94</b>                                                                                                                                                                                                                                                                     | <b>Width</b><br><b>0.70</b> | <b>Depth</b><br><b>0.29</b>                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                                  |                             |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                                  |                             |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> |  | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/><br>other* <input type="checkbox"/> |  | subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| stones* <input type="checkbox"/><br>chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/><br>manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/><br>plant remains* <input type="checkbox"/><br>wood <input type="checkbox"/><br>marine shell <input type="checkbox"/><br>bone* <input type="checkbox"/><br>pot <input type="checkbox"/><br>fired clay / CBM <input type="checkbox"/><br>CTP <input type="checkbox"/><br>mortar/plaster <input type="checkbox"/><br>leather/textile <input type="checkbox"/><br>glass <input type="checkbox"/><br>metal <input type="checkbox"/><br>industrial waste <input type="checkbox"/><br>lithics <input type="checkbox"/><br>coarse stone <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| frequency <input type="checkbox"/><br>bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## CROSS REFERENCE

## Basic process

construction ☒ use ☐ discard ☐

|            |          |                                  |                                                                                                                                         |
|------------|----------|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Find nos | Photo nos                        | Drawing nos                                                                                                                             |
|            |          | 0500889,<br>05008897,<br>0500893 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D05130</b> |

|            |                 |
|------------|-----------------|
| Date       | <b>12/10/17</b> |
| Initials   | <b>J.D.S.</b>   |
| Checked by | <b>J.D.S.</b>   |

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Cut [050968] of Gully. This gully comes from the NE and at this point is being interrupted by the ditch [050966]; after this point it is not clear if it continues to the SW disappearing in the L.D.E. or if it turns to the SE just here.

This gully is filled by only one context: (050967) and could be part of a draining system earlier than the enclosure system which ditch [050966] belong.

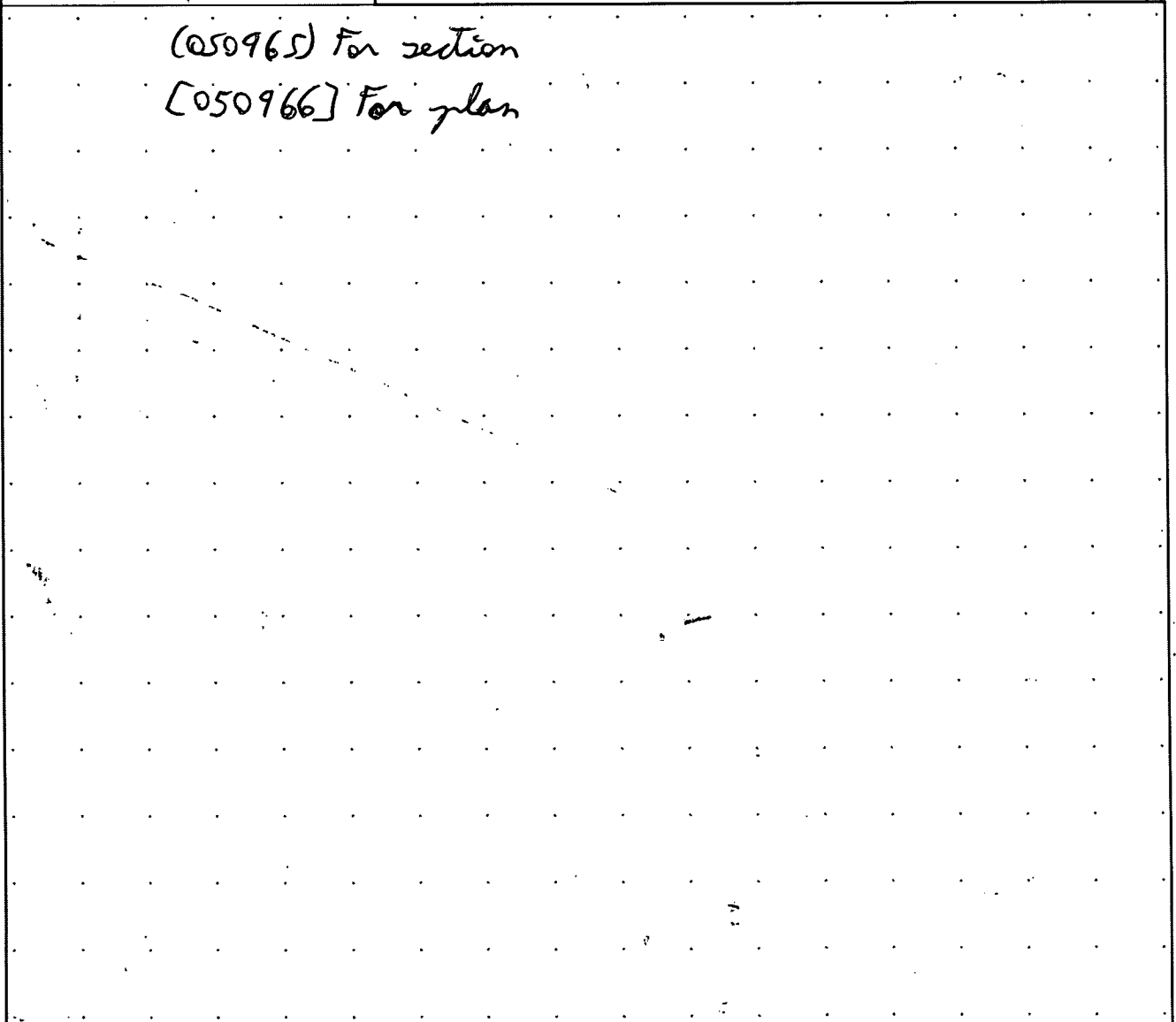
Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

(050965) For section

[050966] For plan





# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                            |                                   |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA05</b> | Sub-area/Trench<br><b>1</b>       | Context number<br><b>[050969]</b>                                                                                      |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>       | Parent context<br><b>[050969]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                              |
|--|--|-----------------|--|--|------------------------------|
|  |  | <b>[050970]</b> |  |  | Same as context <b>—</b>     |
|  |  | <b>[050969]</b> |  |  | Cuts context <b>[050972]</b> |
|  |  | <b>[050003]</b> |  |  | Cut by context <b>—</b>      |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                  |              |                                                                                                                                                                                                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Shape                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                  |              |                                                                                                                                                                                                                               |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                  |              |                                                                                                                                                                                                                               |
| Orientation                                                                                                                                                                                                                                                                             |  | Sides                                                                                                                                                                                                                                                                            |              | Base                                                                                                                                                                                                                          |
| <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                                                                                                             |  | <input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input checked="" type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| Dimensions                                                                                                                                                                                                                                                                              |  | Length                                                                                                                                                                                                                                                                           | Width        | Depth                                                                                                                                                                                                                         |
| in metres                                                                                                                                                                                                                                                                               |  | <b>0.89M</b>                                                                                                                                                                                                                                                                     | <b>0.92M</b> | <b>0.60M</b>                                                                                                                                                                                                                  |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                  |              |                                                                                                                                                                                                                               |
| design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                       |  |                                                                                                                                                                                                                                                                                  |              |                                                                                                                                                                                                                               |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input checked="" type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    |                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|---------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| Compaction                                                                                                                                            |         | Colour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |          | Composition                                                                                                                                                                                                                                                                                                                        |                  |
| <input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |         | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |          | clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                  |
| Thickness                                                                                                                                             |         | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                    |                  |
| Inclusions                                                                                                                                            |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    |                  |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                     | stones* | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | iron pan | manganese                                                                                                                                                                                                                                                                                                                          | charcoal         |
|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    | plant remains*   |
|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    | wood             |
|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    | marine shell     |
|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    | bone*            |
|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    | pot              |
|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    | fired clay / CBM |
|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    | CTP              |
|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    | mortar/plaster   |
|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    | leather/textile  |
|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    | glass            |
|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    | metal            |
|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    | industrial waste |
|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    | lithics          |
|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    | coarse stone     |
| frequency                                                                                                                                             |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    |                  |
| bulk find                                                                                                                                             |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                    |                  |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### CROSS REFERENCE

### Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>11/6/18</b>                                                                                                      |
| Initials <b>STE</b>                                                                                                      |
| Checked by <b>L.b.h.</b>                                                                                                 |

|            |           |                                                                                        |                                                                                                                                           |
|------------|-----------|----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                                                              | Drawing nos                                                                                                                               |
|            |           | <b>0500894</b><br><b>0500895</b><br><b>0500896</b><br><b>0500897</b><br><b>0500898</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>DH005132</b> |

This form is to be filled in for items marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

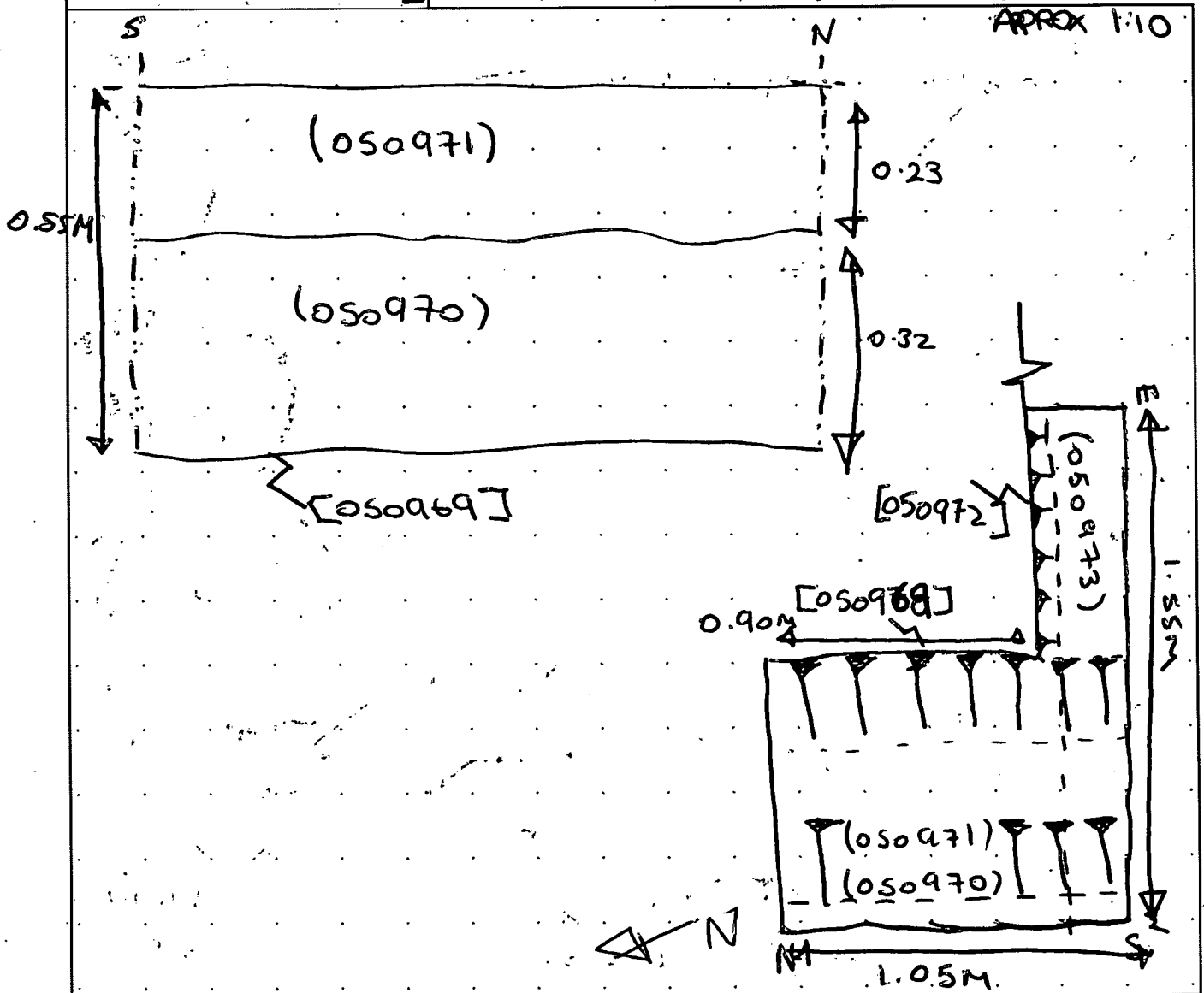
(any further details that may be important for understanding the context, including items marked \* overleaf)

DITCH [0500969] - TWO FILLS - (050970) + (050971)  
 USE UNKNOWN FOR CERTAIN POSSIBLY PART OF FIELD SYSTEM  
 DRAINAGE OR BOUNDARY.  
 SMALL AMOUNT OF BONE AND POT FOUND IN (050971)  
 NO FINDS IN (050970)  
 DATE IS PROVISIONALLY ROMAN DUE TO FINDS.  
 THE EXACT WIDTH OF FEATURE IS UNKNOWN, FEATURE  
 CONTINUES UNDER SW LIMIT OF EXCAVATION.

Refer to context [050972]

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)





# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 05</b> | Sub-area/Trench<br><b>1</b>       | Context number<br><b>(050970)</b>                                                                                      |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>        | Parent context<br><b>[050969]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                              |
|--|--|-----------------|--|--|------------------------------|
|  |  | <b>(050971)</b> |  |  | Same as context <b>—</b>     |
|  |  | <b>(050970)</b> |  |  | Cuts context <b>[050972]</b> |
|  |  | <b>[050969]</b> |  |  | Cut by context <b>—</b>      |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br><input checked="" type="checkbox"/> N                                                                                          |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                         | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |   |                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |   | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown<br>greyish <input type="checkbox"/> <input type="checkbox"/> grey<br>orangeish <input checked="" type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> <input type="checkbox"/> red<br>blueish <input type="checkbox"/> <input type="checkbox"/> blue<br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> |   | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input type="checkbox"/> <input type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat<br>other* <input type="checkbox"/> |  | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input checked="" type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |
| <b>Thickness</b><br><b>0.33m</b>                                                                                                                                                      |   | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |   |                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |   |                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency                                                                                                                                                                             | M | O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | O |                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| bulk find                                                                                                                                                                             |   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |   |                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

0500894-  
0500899

### CROSS REFERENCE

### Basic process

construction ☒ use ☐ disuse ☒

|            |           |                                                                |                                                                                                                                            |
|------------|-----------|----------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                                      | Drawing nos                                                                                                                                |
|            |           | 0500893<br>0500894<br>0500895<br>0500896<br>0500897<br>0500898 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>01-005132</b> |

Date **11/10/17**

Initials **SSC**

Checked by **L. B. S.**

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Primary Fill (050970) of Ditch Cut [050969]

It was a moderately compacted mid orangeish brown sandy clay. This fill (050970) Gravel >2.0mm and occasional charcoal. Some Bioturbation (worms + roots)

Fill appears to be low energy deposit formed by natural process of weathering.

Secondary fill above: (050971)

Ditch [050969] cuts another feature possible gully/ditch [050972]

Refer to context [050969]

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                 |                                                                                                                        |
|-------------------------|----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA05</b> | Sub-area/Trench<br><b>1</b>     | Context number<br><b>(050971)</b>                                                                                      |
| ECB#<br><b>—</b>        | Subgroup<br><b>—</b>       | Parent context<br><b>050969</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                              |
|--|--|-----------------|--|--|------------------------------|
|  |  | <b>(050959)</b> |  |  | Same as context              |
|  |  | <b>(050971)</b> |  |  | Cuts context <b>[050972]</b> |
|  |  | <b>(050970)</b> |  |  | Cut by context               |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Shape                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |
| Orientation                                                                                                                                                                                                                                                                  |  | Sides                                                                                                                                                                                                                                                                 |       | Base                                                                                                                                                                                                               |
| <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br><input checked="" type="checkbox"/> N                                                                                                |  | <input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |       | <input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| Dimensions                                                                                                                                                                                                                                                                   |  | Length                                                                                                                                                                                                                                                                | Width | Depth                                                                                                                                                                                                              |
| in metres                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |
| design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                       |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          |                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Compaction                                                                                                                                                       |                          | Colour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                          | Composition                                                                                                                                                                                                                                                                                                                                              |                                     |
| <input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown<br>greyish <input checked="" type="checkbox"/> <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> <input type="checkbox"/> red<br>blueish <input type="checkbox"/> <input type="checkbox"/> blue |                          | clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> <input type="checkbox"/> silt<br>sandy <input type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat |                                     |
| Thickness                                                                                                                                                        |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                          |                                     |
| 0.25M                                                                                                                                                            |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          |                                     |
| Inclusions                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          |                                     |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                | charcoal                            |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          | plant remains*                      |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          | wood                                |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          | marine shell                        |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          | bone*                               |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          | pot                                 |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          | fired clay / CBM                    |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          | CTP                                 |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          | mortar/plaster                      |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          | leather/textile                     |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          | glass                               |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          | metal                               |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          | industrial waste                    |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          | lithics                             |
|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                                                                                                          | coarse stone                        |
| frequency                                                                                                                                                        | F                        | O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          |                                                                                                                                                                                                                                                                                                                                                          |                                     |
| bulk find                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input checked="" type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## CROSS-REFERENCE

## Basic process

|            |           |           |             |
|------------|-----------|-----------|-------------|
| Sample nos | Finds nos | Photo nos | Drawing nos |
|            |           | 0500893   |             |
|            |           | 0500894   |             |
|            |           | 0500895   |             |
|            |           | 0500896   |             |
|            |           | 0500897   |             |
|            |           | 0500898   |             |
|            |           | 0500899   |             |
|            |           | 0500900   |             |
|            |           | 0500901   |             |
|            |           | 0500902   |             |
|            |           | 0500903   |             |
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|            |           | 0500914   |             |
|            |           | 0500915   |             |
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|            |           | 0500918   |             |
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|            |           | 0500937   |             |
|            |           | 0500938   |             |
|            |           | 0500939   |             |
|            |           | 0500940   |             |
|            |           | 0500941   |             |
|            |           | 0500942   |             |
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# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked "overleaf")

SECONDARY FILL [050969]  
 MODERATELY COMPACTED MID GREYISH BROWN, SILTY CLAY  
 INCLUSIONS: Gravel  $\geq 2.00\text{cm}$  + IRON PAN  
 SOME BIOTURBATION (WORMS + ROOTS)  
 APPEARS low ENERGY DEPOSIT FORMED BY NATURAL PROCESS  
 OF WEATHERING  
 PRIMARY fill (050970)  
 DITCH [050969] CUTS ANOTHER Gully / DITCH [050972]

Refer to context [050969]

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEAOS      | 1               | C050972                                                                                                |
| ECB#      | Subgroup   | Parent context  | Context type                                                                                           |
| -         | -          | C050972         | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |          |
|--|--|----------|--|--|-----------------|----------|
|  |  | (050973) |  |  | Same as context |          |
|  |  | (050972) |  |  | Cuts context    | (053139) |
|  |  | 050003   |  |  | Cut by context  |          |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                      |                 | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input checked="" type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input checked="" type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                                                                                                      | <b>Sides</b><br><input type="checkbox"/> vertical<br><input checked="" type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                         | <b>Length</b><br>> 1m                                                                                                                                                                                                                                                                    | <b>Width</b><br>~ 0.65m                                                                                                                                                                                                                      | <b>Depth</b><br>0.45 | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                      |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown<br>greyish <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> red<br>blueish <input type="checkbox"/> blue | <b>Composition</b><br>clayey <input type="checkbox"/> clay<br>silty <input type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |
| <b>Thickness</b>                                                                                                                                                                      | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                              | other* <input type="checkbox"/>                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| frequency                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| bulk find                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

### CROSS REFERENCE

### Basic process

construction ☒ use ☐ disuse ☐

|            |           |                                  |                                                                                                                                              |
|------------|-----------|----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                        | Drawing nos                                                                                                                                  |
|            |           | 0500897-9<br>0502514<br>05002521 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>0.05132<br>0.05252 |

|            |          |
|------------|----------|
| Date       | 11.10.17 |
| Initials   | SJE      |
| Checked by | RK       |

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Ditch has a single fill  
for drainage  
Ditch [050972] is cut by ditch [050969]  
date is provisionally Roman or earlier  
Possibly part of field system, similar other features  
present in close proximity

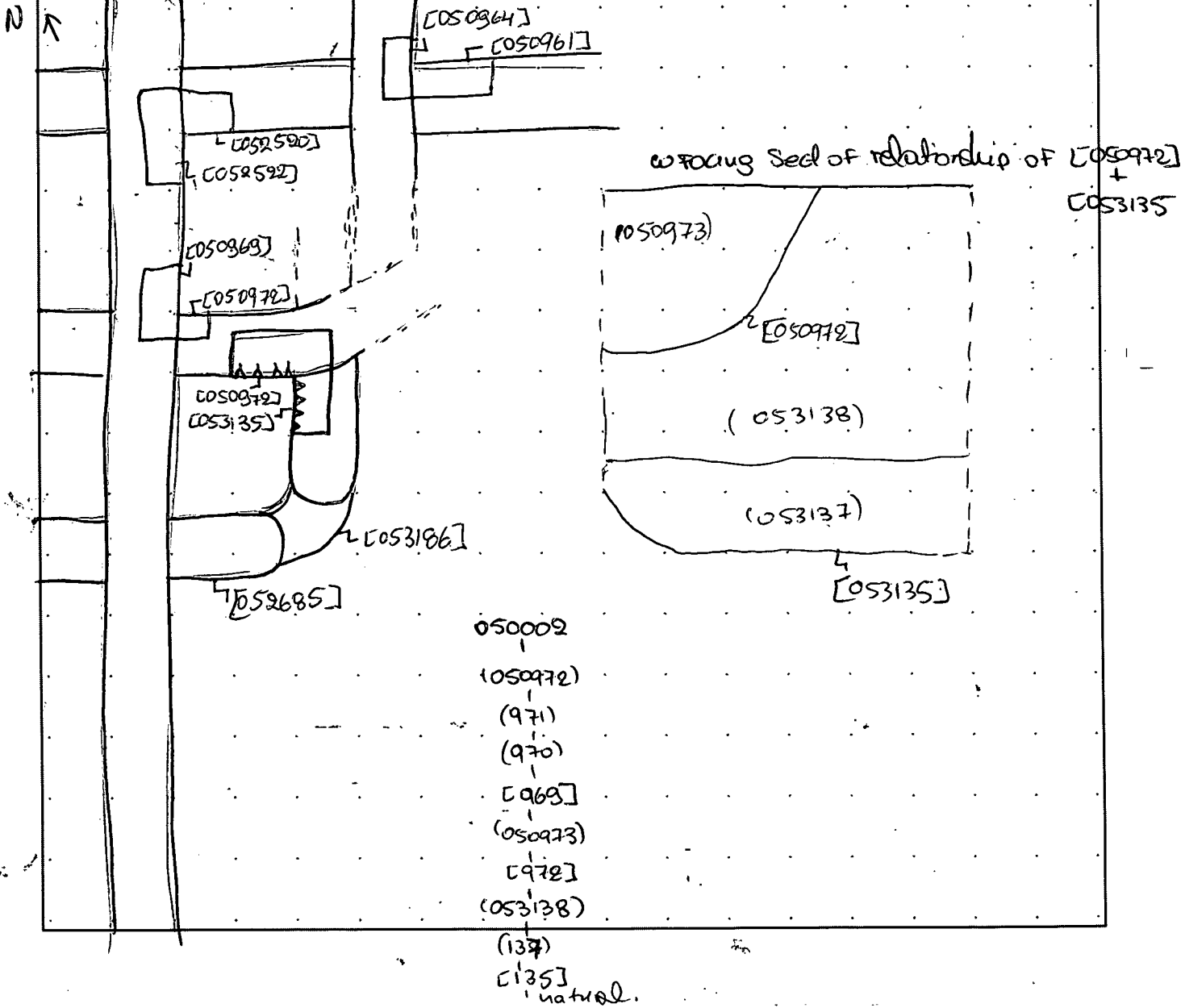
Further investigation ~~has~~ revealed that ditch [050972]  
cuts an earlier ditch [053135]  
Drawing number D05952  
See plan and section below

Refer to context

[050962]

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

SKETCHES





## The image contains two logos. On the left is the MOLA logo, which features a stylized, abstract pattern of white lines on a black background, resembling a topographical map or a network of paths. Below this pattern, the word "MOLA" is written in a bold, white, sans-serif font. On the right is the HEADLAND ARCHAEOLOGY logo, which features a stylized, abstract pattern of white lines on a black background, resembling a topographical map or a network of paths. Below this pattern, the words "HEADLAND" and "ARCHAEOLOGY" are written in a bold, white, sans-serif font, stacked vertically.

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/field | Sub-area/trench | Context number                                                                                         |
| A14       | TEA05      | 1               | (050973)                                                                                               |
| ECR #     | Subgroup   | Parent context  | Context type                                                                                           |
| —         |            | 0509797         | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |          |
|--|--|----------|--|--|-----------------|----------|
|  |  | [050969] |  |  | Same as context | —        |
|  |  | [050973] |  |  | Cuts context    | —        |
|  |  | [050972] |  |  | Cut-by context  | [050969] |

## INTERPRETATION

|                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |       |  |          |  |
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| Shape                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam-slot<br><input type="checkbox"/> construction-cut<br><input type="checkbox"/> robber-cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial-cut<br><input type="checkbox"/> other cut (describe below) |       |  |          |  |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |       |  |          |  |
| Orientation                                                                                                                                                                                                                                                                  |  | Sides                                                                                                                                                                                                                                                         |  | Base                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |       |  |          |  |
| <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                                                                                                             |  | <input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |  | <input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |       |  |          |  |
| N<br>                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |       |  |          |  |
| Dimensions                                                                                                                                                                                                                                                                   |  | Length                                                                                                                                                                                                                                                        |  | Width                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Depth |  | Diameter |  |
| in metres                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |       |  |          |  |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |       |  |          |  |
| design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                       |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |       |  |          |  |

## INTERPRETATION

| Compaction                                                        |                          | Colour                                                                                                                                |                          | Composition                                                              |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
|-------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  |                          | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> |                          | clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| <input checked="" type="checkbox"/> moderately compact            |                          | brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown                                                           |                          | silty <input checked="" type="checkbox"/> <input type="checkbox"/> silt  |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| <input type="checkbox"/> loose                                    |                          | greyish <input checked="" type="checkbox"/> <input type="checkbox"/> grey                                                             |                          | sandy <input type="checkbox"/> <input type="checkbox"/> sand             |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| <input type="checkbox"/> friable                                  |                          | orangeish <input type="checkbox"/> <input type="checkbox"/> orange                                                                    |                          | gravelly <input type="checkbox"/> <input type="checkbox"/> gravel        |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
|                                                                   |                          | yellowish <input type="checkbox"/> <input type="checkbox"/> yellow                                                                    |                          | peaty <input type="checkbox"/> <input type="checkbox"/> peat             |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
|                                                                   |                          | reddish <input type="checkbox"/> <input type="checkbox"/> red                                                                         |                          |                                                                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
|                                                                   |                          | blueish <input type="checkbox"/> <input type="checkbox"/> blue                                                                        |                          |                                                                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| <b>Thickness</b>                                                  |                          |                                                                                                                                       |                          |                                                                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| <b>D-45m</b>                                                      |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                         |                          | other* <input type="checkbox"/>                                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| <b>Inclusions</b>                                                 |                          |                                                                                                                                       |                          |                                                                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                                     |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                  | chalk                                                                                                                                 | iron pan                 | manganese                                                                | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM                    | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                               | industrial waste         | lithics                  | coarse stone             |
| frequency                                                         | F                        |                                                                                                                                       | O                        |                                                                          | O                        |                          |                          |                          | O                        | O                        | O                                   |                          |                          |                          |                          | O                                   |                          |                          |                          |
| bulk find                                                         | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/>                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Basic process:

| Sample nos | Finds nos | Photo nos                                          | Drawing nos                                                                                                                                                       | construction <input checked="" type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
|------------|-----------|----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| /          | /         | 0500897<br>0500898<br>0500899<br>F 53324 0508514 → | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>DH 005132<br><del>0500897</del> 0508514 | Date 11/10/17<br>Initials JTe<br>Checked by J. B. B.                                                                     |

*\*This form is incomplete if fields marked with ▼ are empty. PTO for additional information (and describing all items marked with \*) and sketches.*

050252

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

PRIMARY FLO DITCH [050972]  
 MODERATELY COMPACTED MID GREYISH BROWN SILTY SANDY  
 INCLUSIONS - OCCASIONAL GRAVEL > 2.00CM  
 Bioturbation (worms + roots)  
 LOW ENERGY DEPOSIT BY NATURAL WEATHERING  
 ONLY FLO DITCH [050972]  
 DITCH [050922] IS CUT BY DITCH [050969]  
 One iron nail was found

Refer to context [050969]

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEAS       | A1              | [050974]                                                                                               |
| ECR#      | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [050974]        | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |                   |
|--|--|----------|--|--|-----------------|-------------------|
|  |  | (050975) |  |  | Same as context | [052531] [051247] |
|  |  | [050974] |  |  | Cuts context    | (050977)          |
|  |  | (050003) |  |  | Cut by context  |                   |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                           |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                           |                      | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input checked="" type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input checked="" type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>A                                                                                                                     | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input checked="" type="checkbox"/> steep<br>L <input type="checkbox"/> moderate sloping<br>L <input type="checkbox"/> gentle<br>L <input type="checkbox"/> stepped<br>L <input type="checkbox"/> undercutting<br>L <input type="checkbox"/> complex* | <b>Base</b><br>- <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input checked="" type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>- <input type="checkbox"/> complex* |                           |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br>0'45m Max                                                                                                                                                                                                                                                                                     | <b>Width</b><br>0'27m Max                                                                                                                                                                                                                                | <b>Depth</b><br>0'35m Max | <b>Diameter</b><br>— |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                           |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| excavated                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                           |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/><br>other* <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in-situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>—                                                                                                                                                      | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| frequency                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| bulk find                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

### CROSS REFERENCE

|            |           |                  |                                                                                                                                    |
|------------|-----------|------------------|------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos        | Drawing nos                                                                                                                        |
|            |           | 0500910<br>— 914 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D# 05128 |

### Basic process

|              |                                         |                                 |
|--------------|-----------------------------------------|---------------------------------|
| construction | use <input checked="" type="checkbox"/> | disuse <input type="checkbox"/> |
| Date         | 12/10/17                                |                                 |
| Initials     | R.D.C.                                  |                                 |
| Checked by   | L.B.A.                                  |                                 |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

In Area 1 was excavated a possible drainage gully with a linear shape and a V-shaped base (only is possible to observe the half section of the gully because it was excavated). This slot have a steep sloping side and the running axis is NE-SW. The dimensions of the excavated slot are: 0.45 m MAX OF length, 0.27 m MAX OF width and 0.35 m MAX OF depth.

see also [052531] same context of different slot with different depth suggesting a sloping of the gully direction NE. And [052477] [052539]

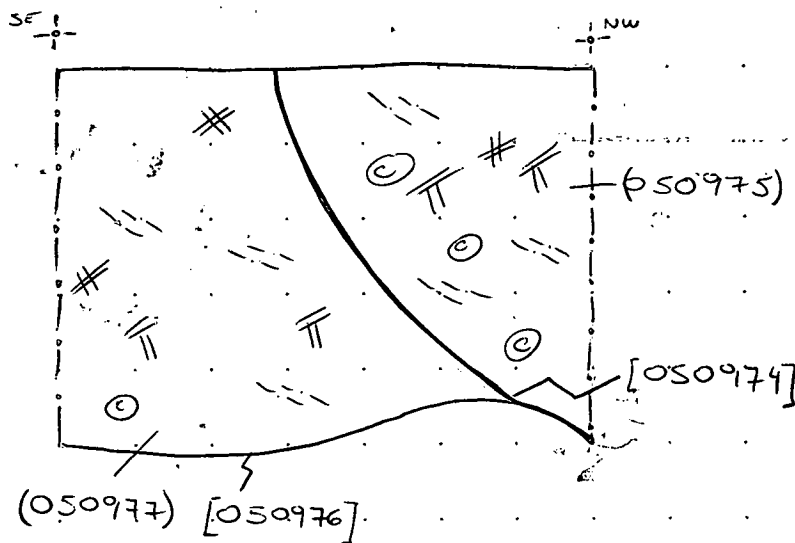
This gully is cutting the context (050977), probably part of the gully [050976]. Probably both [050976] and [050974] were running at the same time, being [050974] the one to be filled.

Refer to context 050975

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

NE Facing section of a relationship between gullies - N.T.S



| Key |          |
|-----|----------|
| #   | charcoal |
|     | silt     |
| ⊙   | chalk    |
| ⌋   | clay     |

## Matrix

(050959)  
|  
(050975)  
|  
[050974]  
|  
(050977)  
|  
[050976]  
|  
(050003)

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                          |                              |                                   |                                                                                                                        |
|--------------------------|------------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TEA 05.</b> | Sub-area/trench<br><b>A.1</b>     | Context number<br><b>(050975)</b>                                                                                      |
| ECD#                     | Subgroup                     | Parent context<br><b>[050974]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                                     |
|--|--|----------|--|--|-------------------------------------|
|  |  | (050959) |  |  | Same as context (052897) - (051247) |
|  |  | (050975) |  |  | Cuts context [050976]               |
|  |  | [050974] |  |  | Cut by context                      |

| CUT<br>(if you are using this section score out section FILL/DEPOSIT below)                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                              | DESCRIPTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | INTERPRETATION |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                              | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other CUT (describe below) <input type="checkbox"/> |                |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input checked="" type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                               |  | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input type="checkbox"/> steep<br>L <input type="checkbox"/> moderate sloping<br>L <input type="checkbox"/> gentle<br>L <input type="checkbox"/> stepped<br>L <input type="checkbox"/> undercutting<br>L <input type="checkbox"/> complex* |              | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>S <input type="checkbox"/> sloping<br>U <input type="checkbox"/> uneven<br>C <input type="checkbox"/> complex |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                |

| FILL/DEPOSIT<br>(if you are using this section score out section CUT above)                                                                                                           |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                                                                                                                | DESCRIPTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | INTERPRETATION           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input checked="" type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input checked="" type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b><br>0.35m max                                                                                                                                                         |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                             | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### CROSS REFERENCE

|            |                            |                                       |                                                                                                                                                          |
|------------|----------------------------|---------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos<br><b>F53145</b> | Photo nos<br><b>0500910</b><br>—> 914 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D# 05128</b> |
|------------|----------------------------|---------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                       |                 |
|---------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Basic process</b><br>construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |                 |
| Date                                                                                                                                  | <b>19/10/17</b> |
| Initials                                                                                                                              | <b>R.D.C.</b>   |
| Checked by                                                                                                                            | <b>L.B.B.</b>   |

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Moderately compact natural infilling. Layer. Have a mid orangeish-grey colour and a clay-silt composition. Only was found a piece of Roman pottery, a Fe object and a piece of animal bone. The maximum thickness is 0.35m.

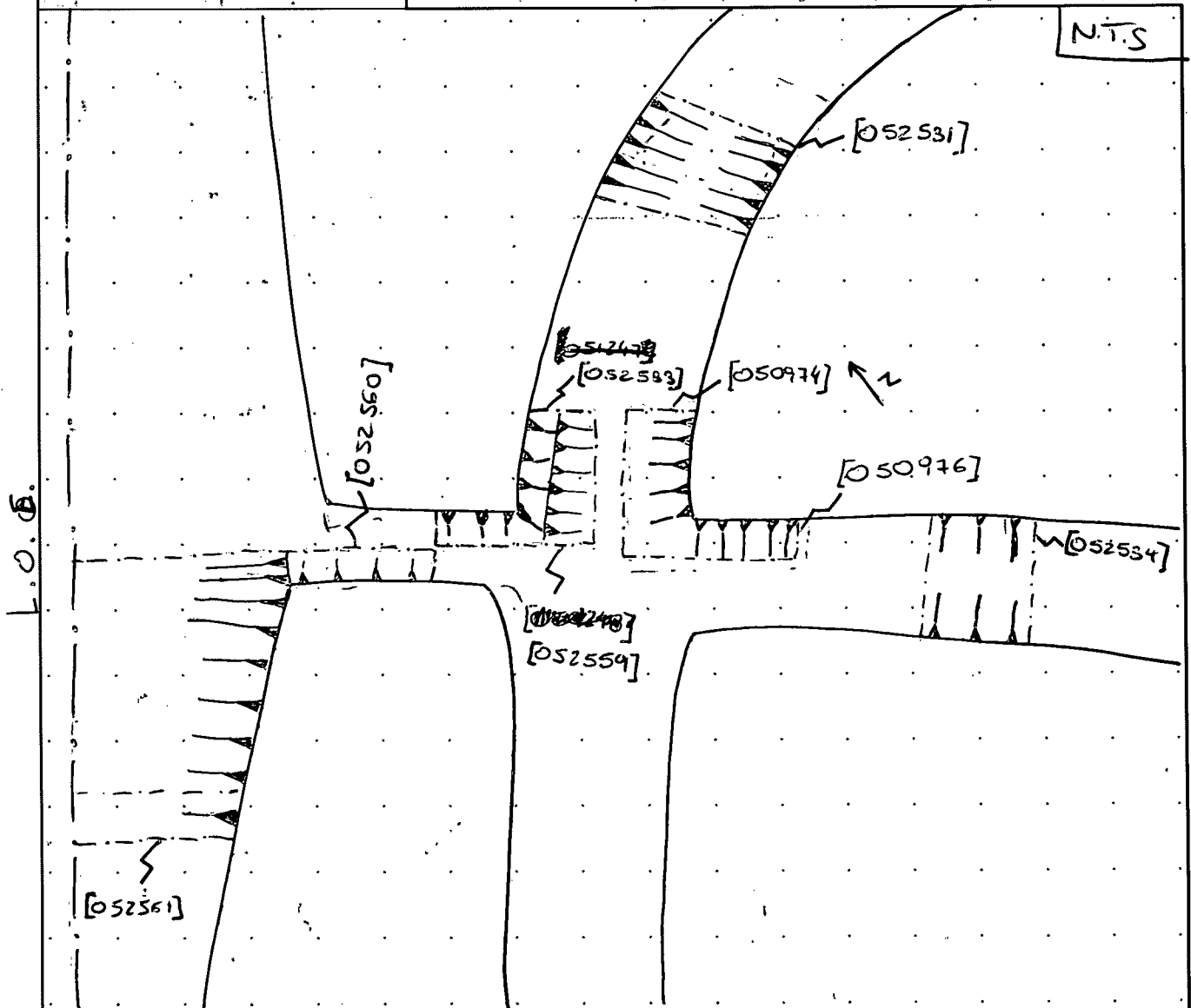
The occasional inclusions and finds and also the composition can suggest an alluvial infilling of the gully. It is hard to observe the relationship between the two gullies <sup>[050974]-[050976]</sup> due to the ~~similar~~ similarity of the composition and the inclusions, probably both are working together and the infilling ~~was~~ of both was in a similar time, but the gully [050974] was working a little longer. For that reason it is possible to see the relationship.

Refer to context

050974

SKETCHES  
(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

N.T.S



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                          |                             |                                   |                                                                                                                        |
|--------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A.14</b> | Area/Field<br><b>TEA 05</b> | Sub-area/Trench<br><b>A.1</b>     | Context number<br><b>[050976]</b>                                                                                      |
| ECB.#                    | Subgroup                    | Parent context<br><b>[050976]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                                 |
|--|--|-----------------|--|--|---------------------------------|
|  |  | <b>(050977)</b> |  |  | Same as context <b>[052534]</b> |
|  |  | <b>[050976]</b> |  |  | Cuts context                    |
|  |  | <b>(050003)</b> |  |  | Cut by context <b>(050975)</b>  |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                                  |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                                  |                      | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input checked="" type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input checked="" type="checkbox"/> NW-SE<br>N<br>(N)                                                                                                                   | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input checked="" type="checkbox"/> steep<br>L <input type="checkbox"/> moderate sloping<br>L <input type="checkbox"/> gentle<br>L <input type="checkbox"/> stepped<br>L <input type="checkbox"/> undercutting<br>L <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input checked="" type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |                                  |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br><b>0'17m MAX</b>                                                                                                                                                                                                                                                                              | <b>Width</b><br><b>0'16m MAX</b>                                                                                                                                                                                                                         | <b>Depth</b><br><b>0'34m MAX</b> | <b>Diameter</b><br>— |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of:</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                      |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                                  |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| excavated                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                                  |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                            | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b>                                                                                                                                                           | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| frequency                                                                                                                                                                  | stones* <input type="checkbox"/><br>chalk <input type="checkbox"/><br>iron/iron <input type="checkbox"/><br>manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/><br>plant remains* <input type="checkbox"/><br>wood <input type="checkbox"/><br>marine shell <input type="checkbox"/><br>bone* <input type="checkbox"/><br>pot <input type="checkbox"/><br>fired clay / CBM <input type="checkbox"/><br>CTP <input type="checkbox"/><br>mortar/plaster <input type="checkbox"/><br>leather/textile <input type="checkbox"/><br>glass <input type="checkbox"/><br>metal <input type="checkbox"/><br>industrial waste <input type="checkbox"/><br>lithics <input type="checkbox"/><br>coarse stone <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| bulk find                                                                                                                                                                  | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|             |            |                                                |                                                                                                                                                           |
|-------------|------------|------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos. | Finds nos. | Photo nos.<br><b>0500910</b><br><b>— 79134</b> | Drawing nos.<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D# 05128</b> |
|-------------|------------|------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>12/10/17</b>                                                                                          |
| Initials <b>D.D.C.</b>                                                                                        |
| Checked by <b>L.B.B.</b>                                                                                      |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

In Area 1 was excavated a possible drainage gully, with a linear shape and a v-shaped base (only is possible to observe the half of the gully). This slot have a steep sloping side and the running axis is NW-SE. The dimensions of the excavated ~~area~~ <sup>slot</sup> ~~area~~ are: 0.17m max of length, 0.16m max of width and 0.34m max of depth.

See also [052534] same context or different slot.

This context is cited by the context (050975)

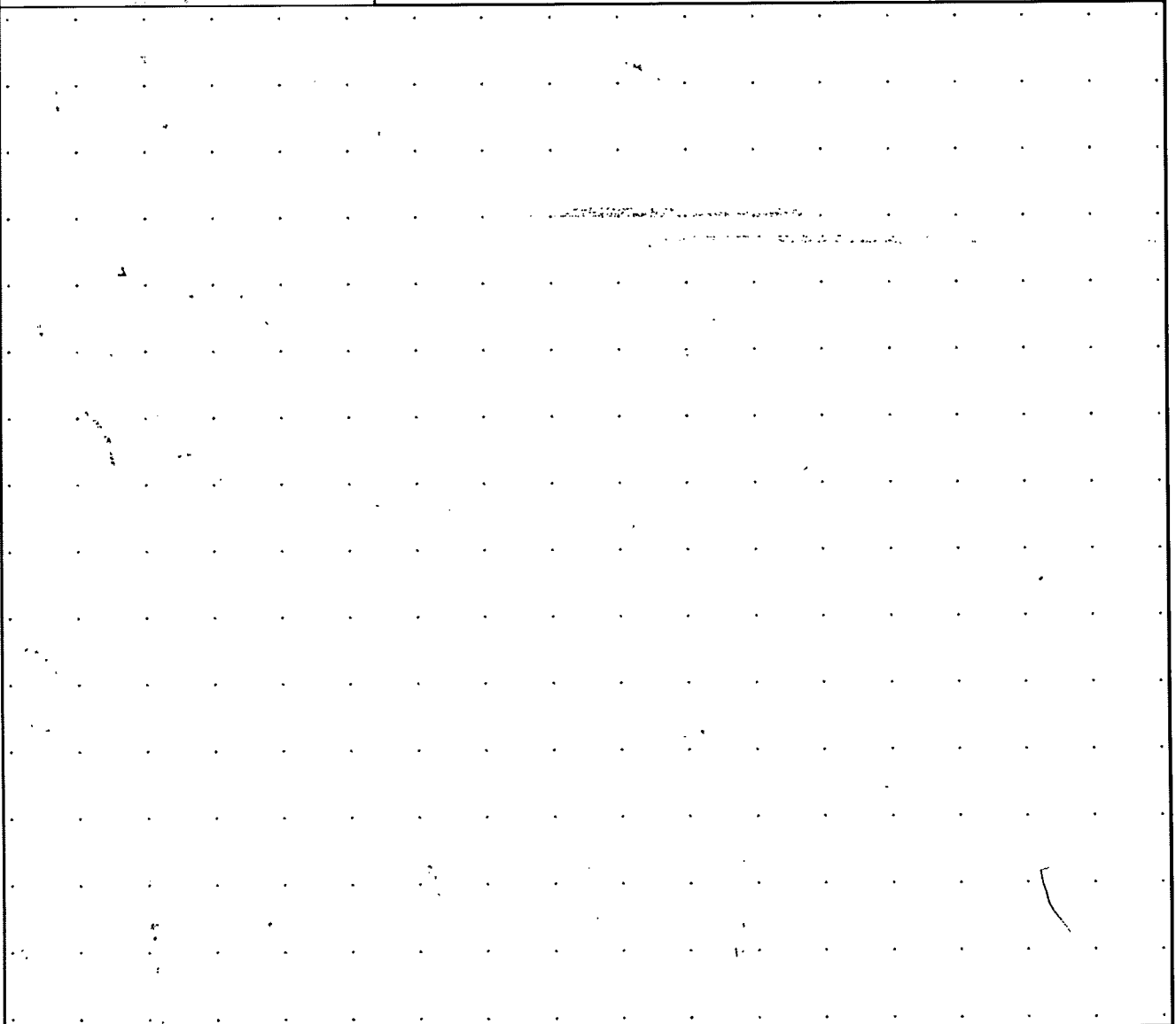
Refer to context

050974

050975

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)





# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                          |                             |                                   |                                                                                                                        |
|--------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>15A 05</b> | Sub-area/trench<br><b>A.1</b>     | Context number<br><b>(050977)</b>                                                                                      |
| ECB #                    | Subgroup                    | Parent context<br><b>[050976]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                                 |
|--|--|-----------------|--|--|---------------------------------|
|  |  | <b>[050974]</b> |  |  | Same as context <b>(052664)</b> |
|  |  | <b>(050977)</b> |  |  | Cuts context                    |
|  |  | <b>[050976]</b> |  |  | Cut by context <b>[050974]</b>  |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                 |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          |  | <b>Sides</b><br>{ <input type="checkbox"/> vertical<br>{ <input type="checkbox"/> steep<br>{ <input type="checkbox"/> moderate<br>{ <input type="checkbox"/> gentle<br>{ <input type="checkbox"/> stepped<br>{ <input type="checkbox"/> undercutting<br>{ <input type="checkbox"/> complex* |              | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>~ <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of:</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                      |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| <b>Shape result of:</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                      |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |          |                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------|--------------|-------|-----|------------------|-----|----------------|-----------------|-------|-------|------------------|---------|--------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |         | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> |          | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/><br>other* <input type="checkbox"/> |          | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input checked="" type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Thickness</b><br>0.34m Max                                                                                                                                                         |         | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |          |                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| frequency                                                                                                                                                                             | stones* | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | iron pan | manganese                                                                                                                                                                                                                                                                                                                                                                                                         | charcoal |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains* | wood | marine shell | bone* | pot | fired clay / CBM | CTP | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone |
| bulk find                                                                                                                                                                             |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |          |                                                                                                                                                                                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |

## CROSS REFERENCE

|            |           |                                 |                                                                                                                                           |
|------------|-----------|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                       | Drawing nos                                                                                                                               |
|            |           | <b>0500910</b><br><b>— 7914</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D# 05128</b> |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> distal <input checked="" type="checkbox"/> |
| Date <b>12/10/17</b>                                                                                          |
| Initials <b>R.D.C.</b>                                                                                        |
| Checked by <b>L.B.A.</b>                                                                                      |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked "overleaf")

Moderately compact natural infilling layer of a gully. Have a mid brownish grey colour and a clayey-silt composition. Only one fragment of animal bone has been found. The maximum thickness is 0'34m. The occasional charcoal, bone and chalk present in the fill and the composition can suggest a alluvial infilling of the gully.

This fill is present in the two slots of the same gully [050976]-[052534]. The only difference between the two fills is the presence occasional chalk in (050977).

See also (052664) and (050975) for an explanation of the relationship between the two gullies.

This fill is cited by context [050974]

Refer to context

050974  
050975

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA 05     |                 | [050978]                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [050978]        | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | [050980] |  |  | Same as context |
|  |  | [050978] |  |  | Cuts context    |
|  |  | 050003   |  |  | Cut by context  |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                      |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                      |  | pit <input checked="" type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input checked="" type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                                 | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input checked="" type="checkbox"/> steep<br>I <input type="checkbox"/> moderate sloping<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input checked="" type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |                      |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     | <b>Length</b><br>1.40                                                                                                                                                                                                                                                                                          | <b>Width</b><br>0.70                                                                                                                                                                                                                                     | <b>Depth</b><br>0.81 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Diameter</b><br>—                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                      |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                  |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                      |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| stones* <input type="checkbox"/><br>chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/><br>manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/><br>plant remains* <input type="checkbox"/><br>wood* <input type="checkbox"/><br>marine shell <input type="checkbox"/><br>bone* <input type="checkbox"/><br>pot <input type="checkbox"/><br>fired clay / CBM <input type="checkbox"/><br>CTP <input type="checkbox"/><br>mortar/plaster <input type="checkbox"/><br>leather/textile <input type="checkbox"/><br>glass <input type="checkbox"/><br>metal <input type="checkbox"/><br>industrial waste <input type="checkbox"/><br>lithics <input type="checkbox"/><br>coarse stone <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>frequency</b><br>bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date 23/10/17                                                                                                 |
| Initials EF                                                                                                   |
| Checked by L.S.D.                                                                                             |

|            |           |                         |                                                                                                                                  |
|------------|-----------|-------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos               | Drawing nos                                                                                                                      |
|            |           | 0500905<br>→<br>0500900 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05731 |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Cut of Pit: The upper fills of this pit have been truncated by ditch [ ] which terminates here. The relationship between this pit and ditch [050992] is unclear as to as any discernable relationship has been destroyed by ditch [ ] cutting both features. \* Pit was likely dug for refuse and some possible Roman pottery has been found in its fills

\* Further excavation reveals ditch [050992] cuts pit fill (050979)

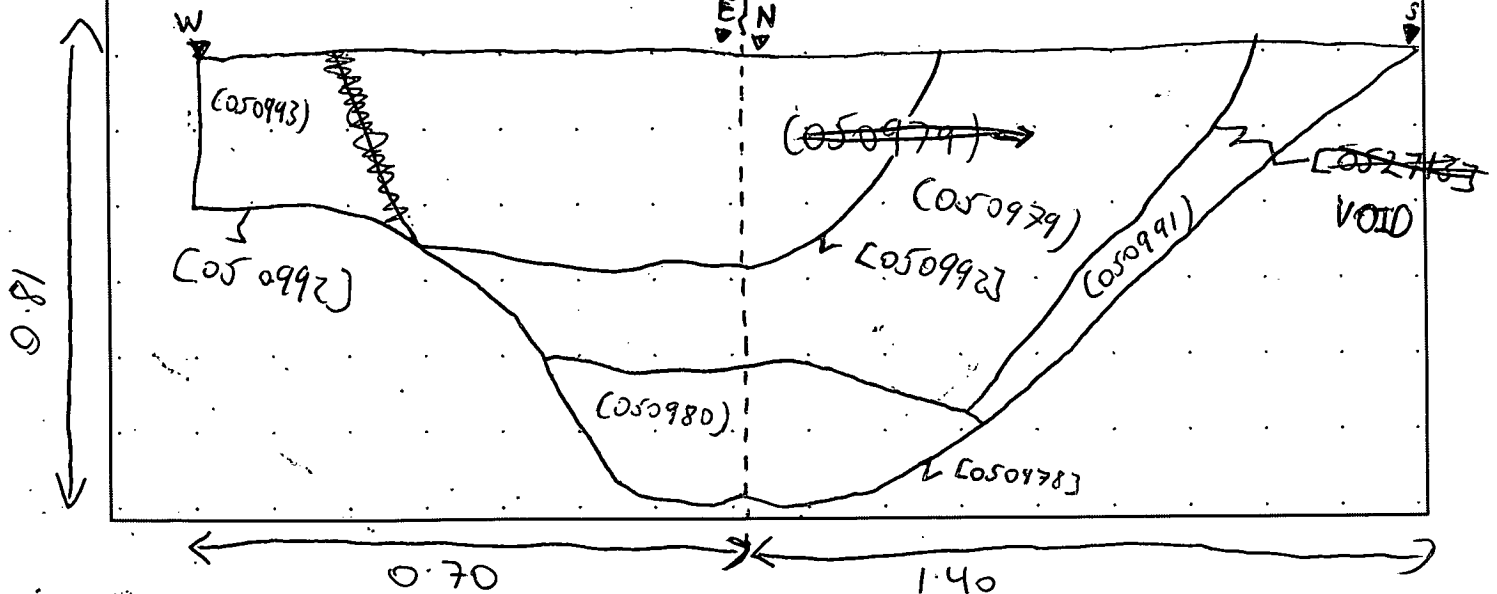
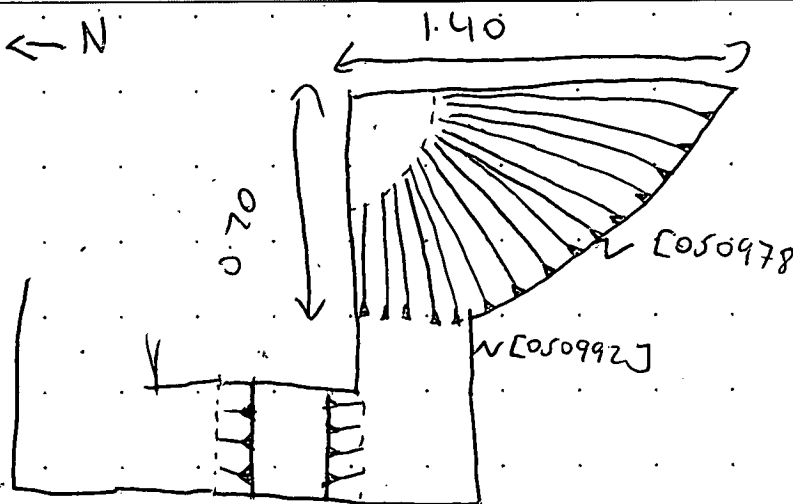
\* Refer to [052595] for larger scale sketch plan of surrounding area \*

\* Ditch Terminus interpretation is void (050979) is now fill of pit and cut [052713] has been voided

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



## STRATIGRAPHY

|  |  |                     |          |  |                 |          |
|--|--|---------------------|----------|--|-----------------|----------|
|  |  | 050002              |          |  | Same as context | (052594) |
|  |  | <del>(050979)</del> | (050977) |  | Cuts context    |          |
|  |  | [052713]            |          |  | Cut by context  | [050992] |

(if you are using this section score out section **FILL/DEPOSIT** below)

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input checked="" type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                               |               | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="margin-left: 10px;">           sloping         </div> </div> |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Depth</b> | <b>Diameter</b>                                                                                                                                                                                                                   |
| <b>Shape result of:</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                 |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |

pit ☐

post-hole ☐

stake-hole ☐

ditch ☐

ring-ditch ☐

beam slot ☐

construction cut ☐

robber cut ☐

gully ☐

palaeochannel ☐

furrow ☐

field boundary ☐

burial cut ☐

other cut (describe below) ☐

(if you are using this section score out section CUT above)

## INTERPRETATION

[illegible]

|  |                                     |                                     |
|--|-------------------------------------|-------------------------------------|
|  | topsoil                             | <input type="checkbox"/>            |
|  | subsoil                             | <input type="checkbox"/>            |
|  | geological subsoil                  | <input type="checkbox"/>            |
|  | remnant topsoil                     | <input type="checkbox"/>            |
|  | surface                             | <input type="checkbox"/>            |
|  | occupation layer                    | <input type="checkbox"/>            |
|  | dumped layer                        | <input type="checkbox"/>            |
|  | deliberate backfill                 | <input type="checkbox"/>            |
|  | destruction debris                  | <input type="checkbox"/>            |
|  | bedding layer                       | <input type="checkbox"/>            |
|  | natural infilling                   | <input checked="" type="checkbox"/> |
|  | colluvial layer                     | <input type="checkbox"/>            |
|  | in situ burning                     | <input type="checkbox"/>            |
|  | post-pipe                           | <input type="checkbox"/>            |
|  | packing                             | <input type="checkbox"/>            |
|  | cremation                           | <input type="checkbox"/>            |
|  | other fill/deposit (describe below) | <input type="checkbox"/>            |

### Basic process

| Sample nos | Finds nos | Photo nos               | Drawing nos                                                                                                                      |
|------------|-----------|-------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| -          | -         | 0500905<br>→<br>0500900 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05131 |

|                                       |          |                              |                                            |
|---------------------------------------|----------|------------------------------|--------------------------------------------|
| construction <input type="checkbox"/> |          | use <input type="checkbox"/> | disuse <input checked="" type="checkbox"/> |
| Date                                  | 23/10/17 |                              |                                            |
| Initials                              | EF       |                              |                                            |
| Checked by                            | J.B.S.   |                              |                                            |

**ADDITIONAL INFORMATION**  
(any further details that may be important for understanding the context, including items marked \*overleaf)

Fill of ~~ditto~~ [E052783] which cuts through filly  
of pit ~~E0504787~~. Two small pot shards and bones  
including a Jaw bone were found within this  
Fill. Pot is moderate - fine dark ware with a  
white center.

Refer to context

0509787

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEAS</b> | Sub-area/Trench<br><b>1</b>       | Context number<br><b>(050980)</b>                                                                                      |
| ECB#                    | Subgroup                  | Parent context<br><b>(050978)</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                                |
|--|--|----------|--|--|--------------------------------|
|  |  | (050991) |  |  | Same as context                |
|  |  | (050480) |  |  | Cuts context                   |
|  |  | (050978) |  |  | Cut by context <b>(052713)</b> |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

**Shape**  
sub- ☐ rectangular ☐ square ☐ circular ☐ linear ☐ curvilinear ☐ irregular ☐ other\* ☐

**Orientation**  
☐ N-S  
☐ E-W  
☐ NE-SW  
☐ NW-SE  
 N

**Sides**  
☐ vertical  
☐ steep  
☐ moderate sloping  
☐ gentle  
☐ stepped  
☐ undercutting  
☐ complex\*

**Base**  
☐ flat  
☐ concave  
☐ v-shaped  
☐ sloping  
☐ uneven  
☐ complex\*

**Dimensions**  
in metres

**Length** **Width** **Depth** **Diameter**

**Shape result of** (tick all that apply)  
 design ☐ material cut into ☐ natural processes ☐ degree of truncation ☐ uncertain ☐

☐ pit  
☐ post-hole  
☐ stake-hole  
☐ ditch  
☐ ring-ditch  
☐ beam slot  
☐ construction cut  
☐ robber cut  
☐ gully  
☐ palaeochannel  
☐ furrow  
☐ field boundary  
☐ burial cut  
☐ other cut (describe below)

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

**Compaction**  
☐ compact  
☐ moderately compact  
☒ loose  
☐ friable

**Colour**  
 light ☒ mid ☐ dark ☐ mottled ☐  
 brownish ☐ brown ☐  
 greyish ☐ grey ☐  
 orangeish ☐ orange ☐  
 yellowish ☐ yellow ☐  
 reddish ☒ red ☐  
 blueish ☐ blue ☐

**Composition**  
 clayey ☐ clay ☒  
 silty ☒ silt ☐  
 sandy ☐ sand ☐  
 gravelly ☐ gravel ☐  
 peaty ☐ peat ☐

**Thickness**  
 0.34  
 black ☐ white ☐ other\* ☐

**Inclusions**  
 use the following:  
 O: occasional  
 M: moderate  
 F: frequent  
 stones\* ☐ chalk ☐ iron pan ☐ manganese ☐ charcoal ☐ plant remains\* ☐ wood ☐ marine shell ☐ bone\* ☐ pot ☐ fired clay / CBM ☐ CTP ☐ mortar/plaster ☐ leather/textile ☐ glass ☐ metal ☐ industrial waste ☐ lithics ☐ coarse stone ☐

**frequency**  
 bulk find ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

☐ topsoil  
☐ subsoil  
☐ geological subsoil  
☐ remnant topsoil  
☐ surface  
☐ occupation layer  
☐ dumped layer  
☐ deliberate backfill  
☐ destruction debris  
☐ bedding layer  
☒ natural infilling  
☐ colluvial layer  
☐ in situ burning  
☐ post-pipe  
☐ packing  
☐ cremation  
☐ other fill/deposit (describe below)

### CROSS REFERENCE

### Basic process

|                        |                       |                                               |                                                                                                                                                        |
|------------------------|-----------------------|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>-</b> | Finds nos<br><b>-</b> | Photo nos<br><b>0500908</b><br><b>0500940</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D05131</b> |
|------------------------|-----------------------|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

☐ construction ☐ use ☐ disuse ☒

Date **12/10/17**  
 Initials **EF**  
 Checked by **L. B. B.**

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

(any further details that may be important for understanding the context, including items marked \* overleaf)

Lower, Sterile Fill of Pit. No archaeological Material Found in this layer

**SKETCHES**  
(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

This image shows a full page of graph paper. The grid consists of small, evenly spaced squares formed by thin black lines. There are approximately 20 columns and 20 rows of squares. The paper has a slightly off-white or aged appearance. There are some faint, dark smudges and marks scattered across the surface, particularly along the left edge and bottom-left corner, which appear to be ink or pencil marks from handling the paper. No text or other graphical elements are present on the page.



## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (050965) |  |  | Same as context |
|  |  | (050981) |  |  | Cuts context    |
|  |  | [050966] |  |  | Cut-by context  |

(if you are using this section score out section **FILL/DEPOSIT** below)

# INTERPRETATION

|                                                                                                                                                                                                                                                                                              |               |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br>                                                  |               | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b>                                                                                                                                                                                                                   |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |               |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |

(if you are using this section score out section CUT above)

## INTERPRETATION

| Compaction                                             |                                                                                                                                       | Colour                                                                   |                          | Composition              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
|--------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                       | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> | clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| <input checked="" type="checkbox"/> moderately compact | brownish <input type="checkbox"/> <input type="checkbox"/> brown                                                                      | silty <input type="checkbox"/> <input type="checkbox"/> silt             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| <input type="checkbox"/> loose                         | greyish <input type="checkbox"/> <input checked="" type="checkbox"/> grey                                                             | sandy <input checked="" type="checkbox"/> <input type="checkbox"/> sand  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| <input type="checkbox"/> friable                       | orangeish <input checked="" type="checkbox"/> <input type="checkbox"/> orange                                                         | gravelly <input type="checkbox"/> <input type="checkbox"/> gravel        |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
|                                                        | yellowish <input type="checkbox"/> <input type="checkbox"/> yellow                                                                    | peaty <input type="checkbox"/> <input type="checkbox"/> peat             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
|                                                        | reddish <input type="checkbox"/> <input type="checkbox"/> red                                                                         |                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
|                                                        | blueish <input type="checkbox"/> <input type="checkbox"/> blue                                                                        |                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| Thickness                                              | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                         | other* <input type="checkbox"/>                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| 0.12 m                                                 |                                                                                                                                       |                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| Inclusions                                             |                                                                                                                                       |                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| use the<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                                                                                                               | chalk                                                                    | iron pan                 | manganese                | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                             | coarse stone             |                          |
| frequency                                              |                                                                                                                                       |                                                                          |                          |                          |                          |                          |                          |                          | O                        |                          |                          |                          |                          |                          |                          |                          |                          | O                                   |                          |                          |
| bulk find.                                             | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/>                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### Basic process

|                                                                                     |                                                                                     |                                                 |                                                                                                                                  |                                                                                                               |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos                                                                          | Find nos                                                                            | Photo nos                                       | Drawing nos                                                                                                                      | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|  |  | 0500 889<br>0500 887 To<br>0500 889<br>1500 891 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>005130 | Date 12/10/17<br>Initials J.O.S.<br>Checked by L.B.S.                                                         |

This form is incomplete if fields marked with ▽ are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Fill (050981) of ditch [050966]. This is the oldest fill of the ditch. It is below fill (050965). This fill is a bit similar to fill (050965) but much more sandy. It has ~~some~~ <sup>few</sup> animal bones and a (possible) flint in it.

This context could be ~~to say~~ the result of a natural process of deposition mixed with the sand of the natural, once the ditch fell into disuse.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

(050965) For section

[050966] For plan



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                            |                                   |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA05</b> | Sub-area/Trench<br><b>1</b>       | Context number<br><b>(050982)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>[050983]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                                |
|--|--|-----------------|--|--|--------------------------------|
|  |  | <b>[050966]</b> |  |  | Same as context                |
|  |  | <b>(050982)</b> |  |  | Cuts context                   |
|  |  | <b>[050983]</b> |  |  | Cut by context <b>[050966]</b> |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          | <b>Sides</b><br>1 <input type="checkbox"/> vertical<br>1 <input type="checkbox"/> steep<br>1 <input type="checkbox"/> moderate sloping<br>1 <input type="checkbox"/> gentle<br>1 <input type="checkbox"/> stepped<br>1 <input type="checkbox"/> undercutting<br>1 <input type="checkbox"/> complex* | <b>Base</b><br>1 <input type="checkbox"/> flat<br>1 <input type="checkbox"/> concave<br>1 <input type="checkbox"/> v-shaped<br>1 <input type="checkbox"/> sloping<br>1 <input type="checkbox"/> uneven<br>1 <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input checked="" type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input checked="" type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input checked="" type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><b>0.05</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| stones* <input type="checkbox"/><br>chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/><br>manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/><br>plant remains* <input type="checkbox"/><br>wood <input type="checkbox"/><br>marine shell <input type="checkbox"/><br>bone* <input type="checkbox"/><br>pot <input type="checkbox"/><br>fired clay / CBM <input type="checkbox"/><br>CTP <input type="checkbox"/><br>mortar/plaster <input type="checkbox"/><br>leather/textile <input type="checkbox"/><br>glass <input type="checkbox"/><br>metal <input type="checkbox"/><br>industrial waste <input type="checkbox"/><br>lithics <input type="checkbox"/><br>coarse stone <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>frequency</b><br>bulk find <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

### Basic process

construction ☐ use ☐ disuse ☒

|            |           |                                                                      |                                                                                                                                         |
|------------|-----------|----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                                            | Drawing nos                                                                                                                             |
|            |           | <b>0500889</b><br><b>0500887</b><br><b>0500888</b><br><b>0500889</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>POS130</b> |

Date **12/10/17**

Initials **J.O.S.**

Checked by **J.S.S.**

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Fill (050982) of post-hole [050983]. This is the only fill of the hole and is completely similar to the fill (050981) of the ditch [050966], even ~~if it~~ <sup>they are</sup> probably the same. It is a sandy-clay fill with no inclusions. It would be the result of a natural process of deposition, once the hole fell into disuse.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

(050965) For section  
(050966) For plan

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 05</b> | Sub-area/Trench<br><b>1</b>       | Context number<br><b>[050983]</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context<br><b>[050983]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                              |
|--|--|-----------------|--|--|------------------------------|
|  |  | <b>(050982)</b> |  |  | Same as context              |
|  |  | <b>[050983]</b> |  |  | Cuts context <b>(050003)</b> |
|  |  | <b>(050003)</b> |  |  | Cut by context               |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                              |                             |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                              |                             |                                | <input type="checkbox"/> pit<br><input checked="" type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br><input checked="" type="checkbox"/> N                                                                                                     | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input checked="" type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                             |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b>                                                                                                                                                                                                                                                                                    | <b>Width</b>                                                                                                                                                                                                                                 | <b>Depth</b><br><b>0.05</b> | <b>Diameter</b><br><b>0.45</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                              |                             |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                              |                             |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------|------------------|---------|--------------|-----------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-----------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | <input checked="" type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>bulk find</td> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | stones*                  | chalk                    | iron pan                 | manganese                | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal        | industrial waste | lithics | coarse stone | frequency |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | bulk find | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | manganese                | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |

0500890 -  
0500891

## CROSS REFERENCE

## Basic process

construction ☒ use ☐ disuse ☐

|            |           |                                 |                                                                                                                                         |
|------------|-----------|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                       | Drawing nos                                                                                                                             |
|            |           | 0500889,<br>0500887,<br>0500888 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>005130</b> |

|            |                 |
|------------|-----------------|
| Date       | <b>12/10/17</b> |
| Initials   | <b>J.O.S.</b>   |
| Checked by | <b>L.B.S.</b>   |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked "overleaf").

Cut [050983] of post-hole. This cut is filled by only one context: (050982). This is a really shallow hole, located in the middle of the ditch. It is quite similar to post-hole [050985] and both of them could just be the result of the erosion in the base of the ditch [050966]. Even the fill (050982) is the same <sup>than</sup> the fill (050981) of that ditch.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

(050965) For section  
[050966] For plan

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 05</b> | Sub-area/ trench<br><b>1</b>      | Context number<br><b>(050984)</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context<br><b>[050985]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                                |
|--|--|-----------------|--|--|--------------------------------|
|  |  | <b>[050966]</b> |  |  | Same as context                |
|  |  | <b>(050984)</b> |  |  | Cuts context                   |
|  |  | <b>[050985]</b> |  |  | Cut by context <b>[050966]</b> |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                      |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input checked="" type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                      |              |                                                                                                                                                                                                                                   | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                                                                                                                  |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          |  | <b>Length</b>                                                                                                                                                                                                                                                                        | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                  |  |                                                                                                                                                                                                                                                                                      |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                      |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                  |                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input checked="" type="checkbox"/> friable |                                                                                                                                                                                                                                                  | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input checked="" type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |  | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat |  | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input checked="" type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><b>0.04</b>                                                                                                                                                                  |                                                                                                                                                                                                                                                  | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | other* <input type="checkbox"/>                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b>                                                                                                                                                                                |                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                | stones*<br>chalk<br>iron pan<br>manganese<br>charcoal<br>plant remains*<br>wood<br>marine shell<br>bone*<br>pot<br>fired clay / CBM<br>CTP<br>mortar/plaster<br>leather/textile<br>glass<br>metal<br>industrial waste<br>lithics<br>coarse stone |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency<br>bulk find                                                                                                                                                                           | 0<br><input checked="" type="checkbox"/>                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

### Basic process

construction ☐ use ☐ disuse ☒

|            |           |                                          |                                                                                                                                         |
|------------|-----------|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                | Drawing nos                                                                                                                             |
|            |           | 0500888<br>0500887<br>0500890<br>0500891 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D05130</b> |

Date **12/10/17**

Initials **J.O.S.**

Checked by **J.A.S.**

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Fill (Q50984) of post-hole [Q50983]. This is the only fill of the hole and is completely similar to the fill (Q50981) of the ditch [Q50966], even ~~it~~<sup>they are</sup> probably the same. It is a sandy-clay fill with no inclusions. It would be the result of a natural process of deposition, once the hole fell into disuse.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

(Q50965) For section

[Q50966] For plan



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                   |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEADS</b> | Sub-area/Trench<br><b>1</b>       | Context number<br><b>[050985]</b>                                                                                      |
| ECB#                    | Subgroup                   | Parent context<br><b>[050985]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                              |
|--|--|-----------------|--|--|------------------------------|
|  |  | <b>[050984]</b> |  |  | Same as context              |
|  |  | <b>[050985]</b> |  |  | Cuts context <b>(050003)</b> |
|  |  | <b>(050003)</b> |  |  | Cut by context               |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                               |                             |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                               |                             |                                | pit <input type="checkbox"/><br>post-hole <input checked="" type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>II <input type="checkbox"/> E-W<br>III <input type="checkbox"/> NE-SW<br>IV <input type="checkbox"/> NW-SE<br>N                                                                                                                                 | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>II <input type="checkbox"/> steep<br>III <input type="checkbox"/> moderate<br>IV <input checked="" type="checkbox"/> gentle<br>V <input type="checkbox"/> stepped<br>VI <input type="checkbox"/> undercutting<br>VII <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>II <input checked="" type="checkbox"/> concave<br>III <input type="checkbox"/> v-shaped<br>IV <input type="checkbox"/> sloping<br>V <input type="checkbox"/> uneven<br>VI <input type="checkbox"/> complex* |                             |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br>/                                                                                                                                                                                                                                                                                            | <b>Width</b><br>/                                                                                                                                                                                                                                             | <b>Depth</b><br><b>0.04</b> | <b>Diameter</b><br><b>0.28</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                               |                             |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                               |                             |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/><br>other* <input type="checkbox"/> | topsoil <input checked="" type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>/                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency<br>Bulk find                                                                                                                                                                | stones*<br>chalk<br>iron pan<br>manganese<br>charcoal<br>plant remains*<br>wood<br>marine shell<br>bone*<br>pot<br>fired clay / CBM<br>CTP<br>mortar/plaster<br>leather/textile<br>glass<br>metal<br>industrial waste<br>lithics<br>coarse stone                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| /                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

## Basic process

construction ☒ use ☐ disuse ☐

|            |           |                                                                      |                                                                                                                                         |
|------------|-----------|----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                                            | Drawing nos                                                                                                                             |
|            |           | <b>0500885</b><br><b>0500887</b><br><b>0500890</b><br><b>0500891</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>005130</b> |

|            |                 |
|------------|-----------------|
| Date       | <b>12/10/17</b> |
| Initials   | <b>J.O.S.</b>   |
| Checked by | <b>L.B.O.</b>   |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Cut [050985] of post-hole. This cut is filled by only one context: (050982). This is a really shallow hole, located in the middle of the ditch [050966]. It is quite similar to post-hole [050983] and both of them could just be the result of the erosion on the base of the ditch [050966], even the fill (050984) is the same than the fill (050981) of that ditch.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

(050965) For section  
[050966] For plan



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA 5      | 1               | [050986]                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [050986]        | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |          |
|--|--|----------|--|--|-----------------|----------|
|  |  | (050987) |  |  | Same as context | -        |
|  |  | [050986] |  |  | Cuts context    | (050989) |
|  |  | (050990) |  |  | Cut by context  | -        |

### CUT

(If you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                               |       |          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------|
| Shape                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                               |       |          |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                               |       |          |
| Orientation                                                                                                                                                                                                                                                                             | Sides                                                                                                                                                                                                                                                                            | Base                                                                                                                                                                                                                          |       |          |
| <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input checked="" type="checkbox"/> NW-SE<br><br><input checked="" type="checkbox"/> N                                                                                     | <input type="checkbox"/> vertical<br><input checked="" type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |       |          |
| Dimensions                                                                                                                                                                                                                                                                              | Length                                                                                                                                                                                                                                                                           | Width                                                                                                                                                                                                                         | Depth | Diameter |
| in metres                                                                                                                                                                                                                                                                               | >1m                                                                                                                                                                                                                                                                              | 1.10m                                                                                                                                                                                                                         | 0.56m | -        |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                               |       |          |
| design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                       |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                               |       |          |

### FILL/DEPOSIT

(If you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------|------------------|---------|--------------|-----------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-----------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Compaction                                                                                                                                            | Colour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Composition                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                                                                                                             | Inclusions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                     | <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>bulk find</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | stones*                  | chalk                    | iron pan                 | manganese                | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal | industrial waste | lithics | coarse stone | frequency |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | bulk find | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| stones*                                                                                                                                               | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | iron pan                                                                                                                                                                                                                                                                                                                           | manganese                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                                                                                                             | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |

### CROSS REFERENCE

### Basic process

construction ☒ use ☐ disuse ☐

|            |           |                                  |                                                                                                                                  |
|------------|-----------|----------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                        | Drawing nos                                                                                                                      |
| -          | -         | 0500900-1<br>0500902-<br>0500903 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05129 |

Date 13/10/17

Initials P.T.

Checked by J.B.B.

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

0500904

# ADDITIONAL INFORMATION

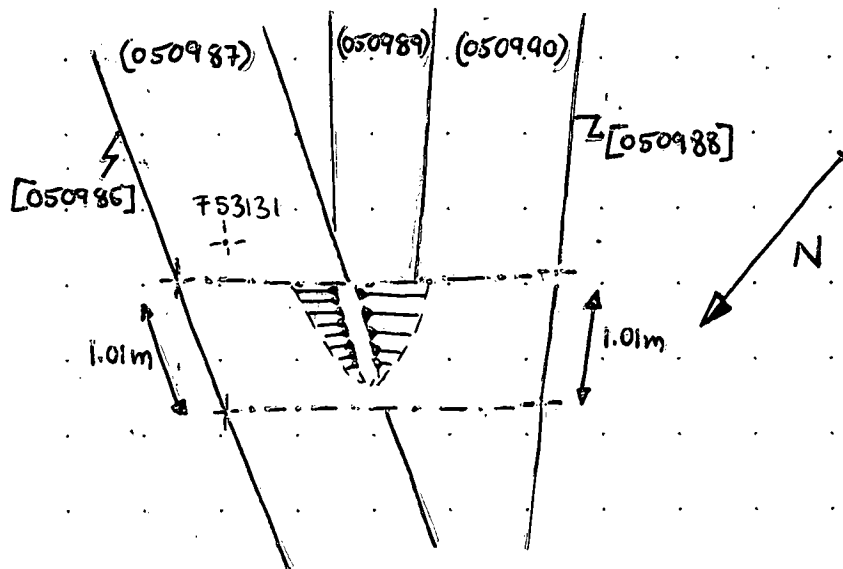
(any further details that may be important for understanding the context, including items marked \* overleaf.)

[050986] IS THE CUT OF A LINEAR SHAPED DITCH WHICH CUTS ANOTHER APPROXIMATELY THE SAME SIZE DITCH. THIS DITCH HAS ONLY ONE FILL WHAT IS PROBABLY A ~~DUMPED~~ <sup>deliberately backfilled</sup> LAYER. THIS DITCH POSSIBLY SERVED AS A DRAINAGE OR BOUNDARY DITCH. THERE ARE SEVERAL, LARGE SIZE ANIMAL BONES FOUND HERE IN SHATTERED STATE, ALSO LARGE AND MEDIUM SIZE POTTERY FRAGMENTS AND TILE PIECES HAVE BEEN RECOVERED HERE. THE POTTERY APPEARS TO BE ROMAN.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/field | Sub area/trench | Context number                                                                                         |
| A14       | TEA 5      | 1               | (050987)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | 1050986         | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (050959) |  |  | Same as context | - |
|  |  | (050987) |  |  | Cuts context    | - |
|  |  | [050986] |  |  | Cut by context  | - |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Shape                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |
| Orientation                                                                                                                                                                                                                                                                  |  | Sides                                                                                                                                                                                                                                                                 |       | Base                                                                                                                                                                                                               |
| <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><input checked="" type="checkbox"/> N                                                                                                    |  | <input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |       | <input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| Dimensions                                                                                                                                                                                                                                                                   |  | Length                                                                                                                                                                                                                                                                | Width | Depth                                                                                                                                                                                                              |
| in metres                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |
| design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                       |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> pit<br><input type="checkbox"/> post hole<br><input type="checkbox"/> stake hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          |                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| Compaction                                                                                                                                                       |         | Colour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |          | Composition                                                                                                                                                                                                                                                                                                                                              |                  |
| <input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |         | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |          | clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                  |
| Thickness                                                                                                                                                        |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                          |                  |
| 0.56m                                                                                                                                                            |         | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |          |                                                                                                                                                                                                                                                                                                                                                          |                  |
| Inclusions                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          |                  |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                | stones* | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | iron pan | manganese                                                                                                                                                                                                                                                                                                                                                | charcoal         |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          | plant remains*   |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          | wood             |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          | marine shell     |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          | bone*            |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          | pot              |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          | fired clay / CBM |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          | CTP              |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          | mortar/plaster   |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          | leather/textile  |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          | glass            |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          | metal            |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          | industrial waste |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          | lithics          |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          | coarse stone     |
| frequency                                                                                                                                                        |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          |                  |
| bulk find                                                                                                                                                        |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          |                  |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input checked="" type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### CROSS REFERENCE

### Basic process

construction ☐ use ☒ disuse ☐

|            |           |                               |                                                                                                                                  |
|------------|-----------|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                     | Drawing nos                                                                                                                      |
|            |           | 0500900<br>0500902<br>0500903 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05129 |

|            |          |
|------------|----------|
| Date       | 13/10/17 |
| Initials   | P.T.     |
| Checked by | L.B.B.   |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

0500904

# ADDITIONAL INFORMATION

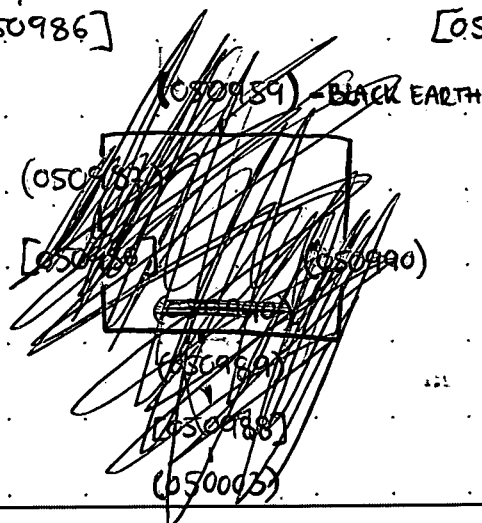
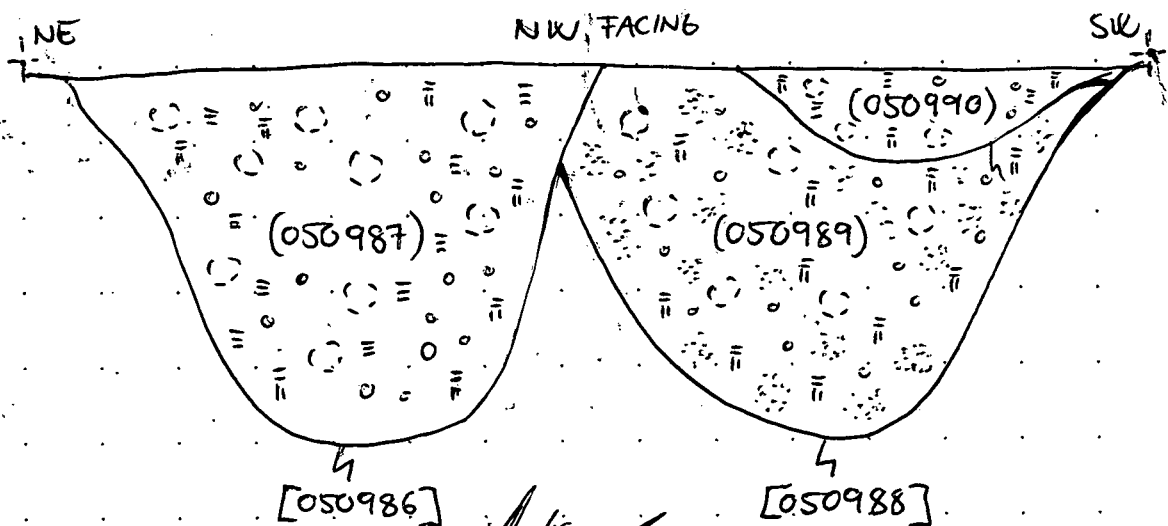
(any further details that may be important for understanding the context, including items marked \* overleaf)

(050987) IS THE ONLY FILL OF LINEAR SHAPE BOUNDARY OR DRAINAGE DITCH. THERE ARE LARGE AMOUNT OF LARGE SIZE ANIMAL BONES, TILE AND POTTERY FRAGMENTS FOUND HERE. THIS FILL IS PROBABLY A DUMPED LAYER OF DOMESTICAL WASTE. BASED ON THE POTTERY FINDS IT IS POSSIBLE TO DATE IT TO THE ROMAN PERIOD.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



(050959)  
|  
(050987)  
|  
[050986]  
|  
(050990)  
|  
(050988)  
|  
[050988]  
|  
(050003)

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA 5      | 1               | [050988]                                                                                               |
| ECB.#     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [050988]        | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (050989) |  |  | Same as context | - |
|  |  | [050988] |  |  | Cuts context    | - |
|  |  | (050003) |  |  | Cut by context  | - |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                      |                      | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input checked="" type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |  |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input checked="" type="checkbox"/> NE-SW<br>I <input checked="" type="checkbox"/> NW-SE<br>N                                                                                                               | <b>Sides</b><br>1 <input type="checkbox"/> vertical<br>1 <input type="checkbox"/> steep<br>1 <input checked="" type="checkbox"/> moderate sloping<br>1 <input type="checkbox"/> gentle<br>1 <input type="checkbox"/> stepped<br>1 <input type="checkbox"/> undercutting<br>1 <input type="checkbox"/> complex* | <b>Base</b><br>1 <input type="checkbox"/> flat<br>1 <input checked="" type="checkbox"/> concave<br>1 <input type="checkbox"/> v-shaped<br>1 <input type="checkbox"/> sloping<br>1 <input type="checkbox"/> uneven<br>1 <input type="checkbox"/> complex* |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br>> 1                                                                                                                                                                                                                                                                                           | <b>Width</b><br>1.05                                                                                                                                                                                                                                     | <b>Depth</b><br>0.55 | <b>Diameter</b><br>- |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/><br>other* <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |  |
| <b>Thickness</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                      | <b>Inclusions</b><br>stones* <input type="checkbox"/><br>chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/><br>manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/><br>plant remains* <input type="checkbox"/><br>wood <input type="checkbox"/><br>marine shell <input type="checkbox"/><br>bone* <input type="checkbox"/><br>pot <input type="checkbox"/><br>fired clay / CBM <input type="checkbox"/><br>CTP <input type="checkbox"/><br>mortar/plaster <input type="checkbox"/><br>leather/textile <input type="checkbox"/><br>glass <input type="checkbox"/><br>metal <input type="checkbox"/><br>industrial waste <input type="checkbox"/><br>lithics <input type="checkbox"/><br>coarse stone <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| <b>frequency</b><br>bulk find <input type="checkbox"/>                                                                                                                     | frequency <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| bulk find <input type="checkbox"/>                                                                                                                                         | frequency <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| bulk find <input type="checkbox"/>                                                                                                                                         | frequency <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |

## CROSS REFERENCE

## Basic process

|                                                                                                               |           |                               |                                                                                                                                  |
|---------------------------------------------------------------------------------------------------------------|-----------|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos                                                                                                    | Finds nos | Photo nos                     | Drawing nos                                                                                                                      |
|                                                                                                               |           | 0500900<br>0500902<br>0500904 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05129 |
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |           |                               |                                                                                                                                  |
| Date 13/10/17<br>Initials P.T.<br>Checked by L.B.B.                                                           |           |                               |                                                                                                                                  |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

[050988] IS A CUT OF A LINEAR SHAPE DITCH WHICH WAS USED POSSIBLY AS A BOUNDARY DITCH OR DRAINAGE. IT HAS TWO FILLS. THERE ARE A FEW FINDS FOUND HERE, A FRAGMENT OF AN ANIMAL BONE AND TWO PIECES OF POTTERY, APPEARS TO BE ROMAN. THE TWO FILLS SEEM TO BE DUMPED LAYERS. THIS DITCH EMERGES INTO ANOTHER DITCH WHICH PRETTY MUCH CUTTING IT THROUGH.

Refer to context

[050986]

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



## STRATIGRAPHY

|  |        |                   |  |                 |        |
|--|--------|-------------------|--|-----------------|--------|
|  | 050986 | <del>050986</del> |  | Same as context | —      |
|  |        | 050989            |  | Cuts context    | —      |
|  |        | 050988            |  | Cut by context  | 050986 |

(if you are using this section score out section **FILL/DEPOSIT** below)

## INTERPRETATION

**Shape**

sub- ☐ rectangular ☐ square ☐ circular ☐ linear ☐ curvilinear ☐ irregular ☐ other\* ☐

**Orientation**

☐ N-S  
☐ E-W  
☒ NE-SW  
☒ NW-SE

**Sides**

☐ vertical  
☐ steep  
☐ moderate  
☐ gentle  
☐ stepped  
☐ undercutting  
☐ complex\*

**Base**

☐ flat  
☐ concave  
☒ v-shaped  
☐ sloping  
☐ uneven  
☐ complex\*

**Dimensions**

Length: \_\_\_\_\_ Width: \_\_\_\_\_ Depth: \_\_\_\_\_ Diameter: \_\_\_\_\_

in metres

**Shape result of** (tick all that apply)

design ☐ material cut into ☐ natural processes ☐ degree of truncation ☐ uncertain ☐

other cut (describe below) \_\_\_\_\_

(if you are using this section score out section **CUT** above)

## INTERPRETATION

[illegible]

### Basic process

| Sample nos. | Finds nos. | Photo nos.                                              | Drawing nos.                                                                                                                      | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
|-------------|------------|---------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| -           | -          | <del>0500889</del><br>0500900-1<br>0500902-3<br>0500904 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 05129 | Date 15/10/17<br>Initials P.T.<br>Checked by L.B.A.                                                           |

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

(050989) IS A BOTTOM FILL OF A LINEAR SHAPE BOUNDARY DITCH (OR DRAINAGE DITCH). THERE ARE ONLY A FEW FINDS FOUND HERE, A BROKEN ANIMAL BONE AND TWO PIECES OF POTTERY FRAGMENTS. THIS FILL IS POSSIBLY A DUMPED LAYER. THE POTTERY FRAGMENTS APPEAR TO BE ROMAN.

Refer to context (050987)

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

A large rectangular area filled with a grid of small dots, intended for drawing sketches related to the archaeological context.



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                            |                                   |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>1</b>       | Context number<br><b>(050990)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>[050988]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |   |
|--|--|-----------------|--|--|-----------------|---|
|  |  | <b>(050959)</b> |  |  | Same as context | — |
|  |  | <b>(050990)</b> |  |  | Cuts context    | — |
|  |  | <b>(050989)</b> |  |  | Cut by context  | — |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |              |                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |              |                 |  | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br>N                                                                                                                                  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |              |                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                         | <b>Width</b>                                                                                                                                                                                                                      | <b>Depth</b> | <b>Diameter</b> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |              |                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |              |                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input checked="" type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><b>0.21 m</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| stones* <input type="checkbox"/><br>chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/><br>manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/><br>plant remains* <input type="checkbox"/><br>wood <input type="checkbox"/><br>marine shell <input type="checkbox"/><br>bone* <input type="checkbox"/><br>pot <input type="checkbox"/><br>fired clay / CBM <input type="checkbox"/><br>CTP <input type="checkbox"/><br>mortar/plaster <input type="checkbox"/><br>leather/textile <input type="checkbox"/><br>glass <input type="checkbox"/><br>metal <input type="checkbox"/><br>industrial waste <input type="checkbox"/><br>lithics <input type="checkbox"/><br>coarse stone <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency <input type="checkbox"/><br>bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

### Basic process

construction ☐ use ☒ disuse ☐

Date **13/10/17**

Initials **P.T.**

Checked by **J.B.B.**

|            |           |                                                     |                                                                                                                                         |
|------------|-----------|-----------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                           | Drawing nos                                                                                                                             |
|            |           | <del>050089</del><br>0500900<br>0500902-<br>0500904 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D05129</b> |

This form is incomplete if fields marked with \* are empty. P.T.O. for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

(050990) IS THE TOP FILL OF LINEAR SHAPE BOUNDARY DITCH (OR DRAINAGE DITCH). THERE ARE NO FINDS RECOVERED FROM HERE. THIS IS SIGNIFICANTLY MORE SHALLOW THAN THE OTHER FILL. THIS IS POSSIBLY A DUMPED LAYER.

Refer to context (050987)

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

[052713]

STRATIGRAPHIC MATRIX.

## STRATIGRAPHY

|  |  |          |  |  |                 |         |
|--|--|----------|--|--|-----------------|---------|
|  |  | (050979) |  |  | Same as context |         |
|  |  | (050941) |  |  | Cuts context    |         |
|  |  | (050980) |  |  | Cut by context  | C052713 |

(if you are using this section score out section **FILL/DEPOSIT** below)

### DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                 |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br><input type="checkbox"/> N                                                                                                     | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                 | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br><input type="checkbox"/> design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>              |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                 |

## FILL/DEPOSIT

(If you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

[illegible]

### CROSS REFERENCE

### Basic process

| Sample nos. | Finds nos. | Photo nos.              | Drawing nos.                                                                                                                     | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|-------------|------------|-------------------------|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| -           | -          | 0500906<br>-<br>0500970 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05731 | Date 12/10/19<br>Initials EF<br>Checked by L.B.B.                                                             |

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Side infilling following the slope of the cut, visible in the west facing section of the pit. A single rim shard of a pot was uncovered in this fill. Again, the pot is fine-grained but fired with clay painted black. Two decorative parallel lines can be seen just below the rim.

Refer to context [050978]

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

A large rectangular area filled with a grid of small dots, intended for sketching or drawing a plan or section of the site.

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA 05     |                 | E050992                                                                                                |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | E050492         | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |          |
|--|--|----------|--|--|-----------------|----------|
|  |  | (050993) |  |  | Same as context | (050403) |
|  |  | (050992) |  |  | Cuts context    |          |
|  |  | 050003   |  |  | Cut by context  | 050979   |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                          |                      |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                          |                      |                                                                                                                                                                                                                                              | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam-slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input checked="" type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br>N<br>                                                                                                                          |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input checked="" type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |                      | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          |  | <b>Length</b><br>0.50                                                                                                                                                                                                                                                                    | <b>Width</b><br>0.45 | <b>Depth</b><br>0.31                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Diameter</b><br>0.31                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                                                          |                      |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of:</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                      |  |                                                                                                                                                                                                                                                                                          |                      |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                       |  | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |  | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |  | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                |  | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| stones*<br>chalk<br>iron pan<br>manganese<br>charcoal<br>plant remains*<br>wood<br>marine shell<br>bone*<br>pot<br>fired clay / CBM<br>CTF<br>mortar/plaster<br>leather/textile<br>glass<br>metal<br>industrial waste<br>lithics<br>coarse stone |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| frequency<br>bulk find                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

## Basic process

construction ☒ use ☐ disuse ☐

|            |           |                    |                                                                                                                                  |
|------------|-----------|--------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos          | Drawing nos                                                                                                                      |
|            |           | 0500909<br>0500906 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05131 |

Date 12/10/17

Initials E F

Checked by L.B.B.

(any further details that may be important for understanding the context, including items marked \* overleaf)

Cut of ditch which was extended to determine the relationship with Pit [050978]. Original cut number was [050403]. Ditch cut, fill of PH @ ~~(050977E)~~ (050979)

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

[illegible]



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>ALU</b> | Area/Field<br><b>TEA 05</b> | Sub-area/Trench                   | Context number<br><b>(050993)</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context<br><b>[050992]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**052713**

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                   |  |  |                                                    |
|--|--|-------------------|--|--|----------------------------------------------------|
|  |  | <del>050992</del> |  |  | Same as context <b>(050406)</b>                    |
|  |  | <b>(050993)</b>   |  |  | Cuts context                                       |
|  |  | <b>[050992]</b>   |  |  | Cut by context <b>[050992]</b> <del>[050993]</del> |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                    |       |          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------|
| Shape                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                    |       |          |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                    |       |          |
| Orientation                                                                                                                                                                                                                                                                  | Sides                                                                                                                                                                                                                                                                 | Base                                                                                                                                                                                                               |       |          |
| <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br><input checked="" type="checkbox"/> N                                                                                                | <input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |       |          |
| Dimensions                                                                                                                                                                                                                                                                   | Length                                                                                                                                                                                                                                                                | Width                                                                                                                                                                                                              | Depth | Diameter |
| in metres                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                    |       |          |
| Shape result of: tick all that apply                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                    |       |          |
| design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                       |                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                    |       |          |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Compaction                                                                                                                                                       | Colour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Composition                                                                                                                                                                                                                                                                                                                                              |
| <input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | light <input checked="" type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input checked="" type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |
| Thickness                                                                                                                                                        | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |
| 0.31                                                                                                                                                             | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                          |
| Inclusions                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                | stones*<br>chalk<br>iron pan<br>manganese<br>charcoal<br>plant remains*<br>wood<br>marine shell<br>bone*<br>pot<br>fired clay / CBM<br>CTP<br>mortar/plaster<br>leather/textile<br>glass<br>metal<br>industrial waste<br>lithics<br>coarse stone                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                          |
| frequency                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |
| bulk find                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input checked="" type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## CROSS REFERENCE

## Basic process

construction ☐ use ☐ disuse ☒

Date **12/10/17**

Initials **EF**

Checked by **L.B.B.**

|            |           |                |                                                                                                           |
|------------|-----------|----------------|-----------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos      | Drawing nos                                                                                               |
|            |           | <b>0500906</b> | Surveyed:                                                                                                 |
|            |           | <b>0500900</b> | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|            |           |                | <b>005131</b>                                                                                             |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

(any further details that may be important for understanding the context, including items marked \* overleaf)

Fill of ditch [050992] . A continuation of p fill  
(050404) . ~~Went on and by pit [050978]~~

**SKETCHES**  
(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

This image shows a full page of dot grid paper. The background is white, and it is covered with a regular pattern of small, dark grey or black dots. The dots are arranged in straight horizontal and vertical rows, creating a grid-like appearance. There are no margins, text, or other markings on the page.



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                          |                             |                                    |                                                                                                                        |
|--------------------------|-----------------------------|------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TEA 05</b> | Sub-area/Trench<br><b>1</b>        | Context number<br><b>[0509984]</b>                                                                                     |
| ECB #                    | Subgroup                    | Parent context<br><b>[0509984]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                     |  |                 |                                     |
|--|--|---------------------|--|-----------------|-------------------------------------|
|  |  | <b>[0509984] 5)</b> |  | Same as context | <input checked="" type="checkbox"/> |
|  |  | <b>[0509984]</b>    |  | Cuts context    | <input checked="" type="checkbox"/> |
|  |  | <b>[050003]</b>     |  | Cut by context  | <input checked="" type="checkbox"/> |

### CUT

(If you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                              |                              |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                              |                              |                      | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input checked="" type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input checked="" type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                                                                                                       | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input checked="" type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input checked="" type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                              |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br><b>1M</b>                                                                                                                                                                                                                                                                       | <b>Width</b><br><b>1.3M</b>                                                                                                                                                                                                                  | <b>Depth</b><br><b>0.56M</b> | <b>Diameter</b><br>— |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                              |                              |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                              |                              |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

### FILL/DEPOSIT

(If you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |
| <b>Thickness</b><br>—                                                                                                                                                      | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| frequency                                                                                                                                                                  | bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | tonnes*<br>chalk<br>iron pan<br>manganese<br>charcoal<br>plant remains*<br>wood<br>marine shell<br>bone*<br>pot<br>fired clay / CBM<br>CTP<br>mortar/plaster<br>leather/textile<br>glass<br>metal<br>industrial waste<br>lithics<br>coarse stone                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

### CROSS REFERENCE

### Basic process

construction ☒ use ☐ disuse ☐

|            |           |                                                                              |                                                                                                             |
|------------|-----------|------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                                                    | Drawing nos                                                                                                 |
|            |           | <del>#0500914</del><br><b>#0500915</b><br><b>#0500916</b><br><b>#0500917</b> | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |

Date **12/10/17**

Initials **WPK**

Checked by **L.B.H.**

# DITCH

## ADDITIONAL INFORMATION

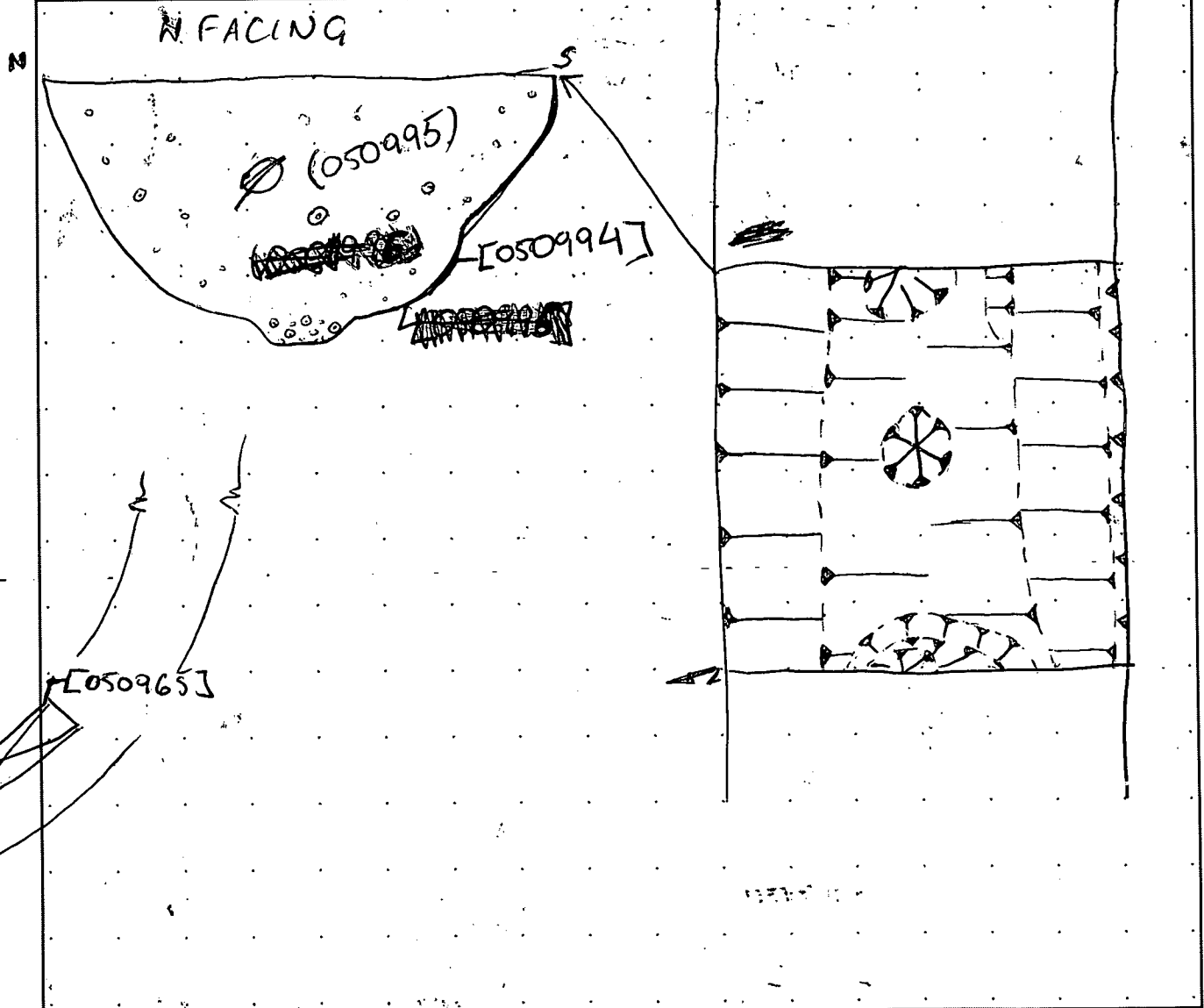
(any further details that may be important for understanding the context, including items marked \* overleaf)

C/O GULLY IS A BIT UNEVEN ON THE BOTTOM, WATER PROBABLY  
 STREAM HERE WITH POWER AND PERTURBANCES (G) THAT WASHED  
 OUT LOOSE AND SOFT MATERIAL, LEAVING THOSE ROUNDISH MARKS.  
 ALSO IT IS VISIBLE THAT MAIN POWER OF STREAM WERE ON  
 DITHES S SIDE, WHERE CUT IS VISIBLY STEPPED WHEN N SIDE IS  
 MORE SMOOTH AND MODERATE.

Refer to context

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



## STRATIGRAPHY

|  |  |           |  |  |                 |   |
|--|--|-----------|--|--|-----------------|---|
|  |  | (050959)  |  |  | Same as context | — |
|  |  | (0509915) |  |  | Cuts context    | — |
|  |  | (0509914) |  |  | Cut by context  | — |

(if you are using this section score out section **FILL/DEPOSIT** below)

# INTERPRETATION

|                                                                                                                                                                                                                                                                              |        |                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Shape                                                                                                                                                                                                                                                                        |        |                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                    |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |        |                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                    |
| Orientation                                                                                                                                                                                                                                                                  |        | Sides                                                                                                                                                                                                                                                         |       | Base                                                                                                                                                                                                               |
| <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                                                                                                             |        | <input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |       | <input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> </div> <div> </div> </div>                                                                                                                                                               |        |                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                    |
| Dimensions                                                                                                                                                                                                                                                                   | Length | Width                                                                                                                                                                                                                                                         | Depth | Diameter                                                                                                                                                                                                           |
| in metres                                                                                                                                                                                                                                                                    |        |                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                    |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                        |        |                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                    |
| design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                       |        |                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                    |

(if you are using this section score out section CUT above)

## INTERPRETATION

| Compaction                                                        |                          | Colour                                                                                                       |                                          | Composition                               |                                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------|------------------------------------------|-------------------------------------------|------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  |                          | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled |                                          | clayey <input type="checkbox"/>           | <input checked="" type="checkbox"/> clay |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input checked="" type="checkbox"/> moderately compact            |                          | brownish <input type="checkbox"/>                                                                            | <input type="checkbox"/> brown           | silty <input type="checkbox"/>            | <input type="checkbox"/> silt            |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    |                          | greyish <input type="checkbox"/>                                                                             | <input checked="" type="checkbox"/> grey | sandy <input checked="" type="checkbox"/> | <input type="checkbox"/> sand            |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> friable                                  |                          | orangeish <input type="checkbox"/>                                                                           | <input type="checkbox"/> orange          | gravelly <input type="checkbox"/>         | <input type="checkbox"/> gravel          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                          | yellowish <input checked="" type="checkbox"/>                                                                | <input type="checkbox"/> yellow          | peaty <input type="checkbox"/>            | <input type="checkbox"/> peat            |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                          | reddish <input type="checkbox"/>                                                                             | <input type="checkbox"/> red             |                                           |                                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                          | blueish <input type="checkbox"/>                                                                             | <input type="checkbox"/> blue            |                                           |                                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b>                                                  |                          |                                                                                                              |                                          |                                           |                                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.56M                                                             |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                |                                          | other* <input type="checkbox"/>           |                                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b>                                                 |                          |                                                                                                              |                                          |                                           |                                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                  | chalk                                                                                                        | iron pan                                 | manganese                                 | charcoal                                 | plant remains*           | wood                     | marine shell             | bone*                               | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |                          |                          |
| frequency                                                         | M                        | M                                                                                                            | O                                        | O                                         | O                                        | -                        | -                        | O                        | O                                   | -                        | O                        | -                        | -                        | -                        | -                        | -                        | -                        | -                        | -                        |                          |                          |
| bulk find                                                         | <input type="checkbox"/> | <input type="checkbox"/>                                                                                     | <input type="checkbox"/>                 | <input type="checkbox"/>                  | <input type="checkbox"/>                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

topsoil ☐  
subsoil ☐  
geological subsoil ☐  
remnant topsoil ☐  
surface ☐  
occupation layer ☐  
dumped layer ☐  
deliberate backfill ☐  
destruction debris ☐  
bedding layer ☐  
natural infilling ☒  
colluvial layer ☐  
in situ burning ☐  
post-pipe ☐  
packing ☐  
cremation ☐  
other fill/deposit (describe below)

### Basic process

| Sample nos. | Findings nos. | Photo nos.                                                  | Drawing nos.                                                                                                | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|-------------|---------------|-------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| —           | —             | <del># 0500914</del><br># 0500915<br># 0500916<br># 0500917 | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | Date: 12/10/17<br>Initials: WK<br>Checked by: L. A. A.                                                        |

This form is incomplete if fields marked with  are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

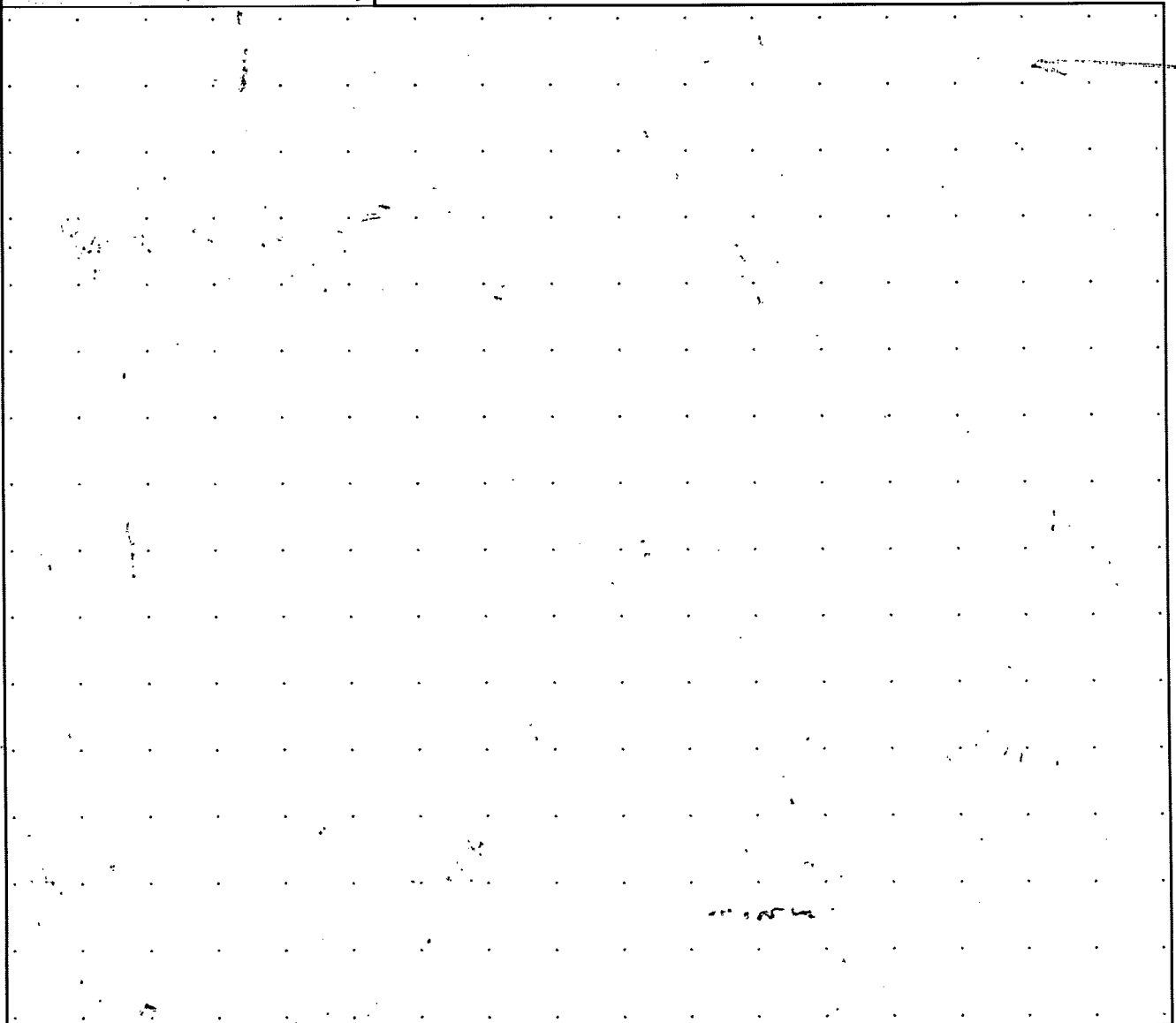
(any further details that may be important for understanding the context, including items marked \* overleaf)

BONES FOUND HERE WAS SHATTERED DUE TO EXCAVATION, ORIGINALLY IT WAS 2 BIG PIECES WITH BUTCHER MARKS (I GUESS SB'S DINNER WASTE). PIECES OF CBM WAS TOO SMALL TO COLLECT I SPOTTED 4-5 OF THOSE. IRON PAN OCCURED ON THE BOTTOM (JUST UNDER CULT) AS A HARD RED LAYER AND ON THE SIDES A BIT. WHAT IS ALSO PARTICULAR SOME OF CHALK BITS WERE PRETTY BIG (~2CM)

Refer to context **205099 4**

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                          |                             |                                   |                                                                                                                        |
|--------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>KEA 05</b> | Sub-area/trench<br><b>A.1</b>     | Context number<br><b>[050996]</b>                                                                                      |
| ECB#                     | Subgroup                    | Parent context<br><b>[050996]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                     |                 |  |                 |                                     |
|--|--|---------------------|-----------------|--|-----------------|-------------------------------------|
|  |  | <b>(050997)</b>     |                 |  | Same as context | <input checked="" type="checkbox"/> |
|  |  | <b>[050996]</b>     |                 |  | Cuts context    | <b>052673</b>                       |
|  |  | <del>(051000)</del> | <b>(051000)</b> |  | Cut by context  | <del>052673</del>                   |

## CUT

(if you are using this section score out section FILL/DEPOSIT below)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                          | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input checked="" type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |  |  |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input checked="" type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          |  | <b>Sides</b><br>{ <input type="checkbox"/> vertical<br>{ <input type="checkbox"/> steep<br>{ <input checked="" type="checkbox"/> moderate } sloping<br>{ <input type="checkbox"/> gentle<br>{ <input type="checkbox"/> stepped<br>{ <input type="checkbox"/> undercutting<br>{ <input type="checkbox"/> complex* |  | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input checked="" type="checkbox"/> uneven<br>X <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          |  | <b>Length</b><br><b>1M &lt;</b>                                                                                                                                                                                                                                                                                  |  | <b>Width</b><br><b>0.7M</b>                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |
|                                                                                                                                                                                                                                                                                                         |  | <b>Depth</b><br><b>0.23M</b>                                                                                                                                                                                                                                                                                     |  | <b>Diameter</b><br><b>—</b>                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |
| <b>Shape result of (tick all that apply)</b><br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                  |  |                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |

## FILL/DEPOSIT

(if you are using this section score out section CUT above)

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |         |                |                 |       |       |                  |         |              |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---------|----------------|-----------------|-------|-------|------------------|---------|--------------|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input checked="" type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input checked="" type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                          | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input checked="" type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |         |                |                 |       |       |                  |         |              |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |         |                |                 |       |       |                  |         |              |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |         |                |                 |       |       |                  |         |              |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td>O</td> <td>-</td> <td>-</td> <td>-</td> <td>H</td> <td>-</td> <td>O</td> <td>H</td> <td>M</td> <td>M</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> <td>-</td> </tr> <tr> <td>bulk find</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          | stones*                             | chalk                               | iron pan                            | manganese                | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP     | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone | frequency | O | - | - | - | H | - | O | H | M | M | - | - | - | - | - | - | - | - | bulk find | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | chalk                    | iron pan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | manganese                | charcoal                                                                                                                                                                                                                                                                                                                                                                       | plant remains*           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          | wood                                | marine shell                        | bone*                               | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics | coarse stone   |                 |       |       |                  |         |              |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | O                        | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | -                        | -                                                                                                                                                                                                                                                                                                                                                                              | H                        | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | O                        | H                                   | M                                   | M                                   | -                        | -                        | -                        | -                        | -                        | -                        | -                        | -                        |         |                |                 |       |       |                  |         |              |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |         |                |                 |       |       |                  |         |              |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |
| other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |         |                |                 |       |       |                  |         |              |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |

## CROSS REFERENCE

|             |            |                      |                                                                                                                                         |
|-------------|------------|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos. | Finds nos. | Photo nos.           | Drawing nos.                                                                                                                            |
| —           | —          | #0502118<br>#0502119 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>#05159</b> |

|                                                                                                                                          |                 |
|------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Basic process</b><br>construction <input checked="" type="checkbox"/> reuse <input type="checkbox"/> discard <input type="checkbox"/> |                 |
| Date                                                                                                                                     | <b>20/10/17</b> |
| Initials                                                                                                                                 | <b>WRE</b>      |
| Checked by                                                                                                                               | <b>L.B.B.</b>   |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

VERY DARK AND CLEARLY VISIBLE DITCH [050998] COMING ACROSS THE SITE NW-SE DIRECTION CUTS TWO OLDER DITCHES ~~(WHICH RELATIONSHIP IS UNKNOWN AND NEED OTHER SLOT TO EXAMINE)~~. DITCH [050996] IS THE MOST ON SW SIDE OF SECTION THAT IS FACING ES IT IS RATHER SHALLOW AND ACCOMPANIES BIGGER DITCH [052673] WHAT IS INTERESTING THIS DITCH/GULLY [050996] IS UNEVEN ON BOTTOM, HAVING ONE DEEPER PART.

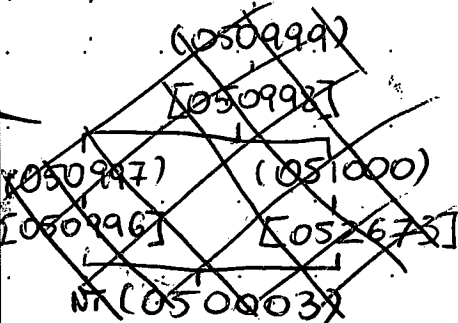
Refer to context

[050996]  
[050998]  
[052673]

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

## SKETCHES

MATRIX:



MATRIX:

(050999)  
[050998]  
(050997)  
[050996]  
(051000)  
[052673]  
(052582)  
NT(050003)



[586050]  
[050983]  
[050985]  
OTHER SLOT



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 05</b> | Sub-area/Trench<br><b>A.1</b>     | Context number<br><b>(050997)</b>                                                                                      |
| ECB II                  | Subgroup                    | Parent context<br><b>[050996]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                              |  |                                    |
|--|--|------------------------------|--|------------------------------------|
|  |  | <del>(050998)</del> (050996) |  | Same as context                    |
|  |  | (050997)                     |  | Cuts context                       |
|  |  | (050996)                     |  | Cut by context <del>(050998)</del> |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

**Shape**

sub- ☐ rectangular ☐ square ☐ circular ☐ linear ☐ curvilinear ☐ irregular ☐ other\* ☐

**Orientation**

**Sides**

☐ N-S  
☐ E-W  
☒ NE-SW  
☐ NW-SE

**Base**

☐ vertical  
☐ steep  
☐ moderate sloping  
☐ gentle  
☐ stepped  
☐ undercutting  
☐ complex\*

**Base**

☐ flat  
☐ concave  
☐ v-shaped  
☐ sloping  
☐ uneven  
☐ complex\*

**Dimensions**

in metres

Length

Width

Depth

Diameter

**Shape result of** (tick all that apply)

design ☐ material cut into ☐ natural processes ☐ degree of truncation ☐ uncertain ☐

☐ pit  
☐ post-hole  
☐ stake-hole  
☐ ditch  
☐ ring-ditch  
☐ beam slot  
☐ construction cut  
☐ robber cut  
☐ gully  
☐ palaeochannel  
☐ furrow  
☐ field boundary  
☐ burial cut  
☐ other CUT (describe below)

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

**Compaction**

☐ compact  
☒ moderately compact  
☐ loose  
☐ friable

**Colour**

light ☐ mid ☐ dark ☒ mottled ☐

brownish ☐ brown  
greyish ☐ grey  
orangeish ☐ orange  
yellowish ☒ yellow  
reddish ☐ red  
blueish ☐ blue

**Composition**

clayey ☐ clay  
silty ☐ silt  
sandy ☒ sand  
gravelly ☐ gravel  
peaty ☐ peat

**Thickness**

**0.23M**

black ☐ white ☐ other\* ☐

**Inclusions**

use the following:  
O: occasional  
M: moderate  
F: frequent

stones\* chalk iron pan manganese charcoal plant remains\* wood marine shell bone\* pot fired clay / CBM CTP mortar/plaster leather/textile glass metal industrial waste lithics coarse stone

frequency

bulk find

☐ topsoil  
☐ subsoil  
☐ geological subsoil  
☐ remnant topsoil  
☐ surface  
☐ occupation layer  
☐ dumped layer  
☒ deliberate backfill  
☐ destruction debris  
☐ bedding layer  
☐ natural infilling  
☐ colluvial layer  
☐ in situ burning  
☐ post-pipe  
☐ packing  
☐ cremation  
☐ other fill/deposit (describe below)

### CROSS REFERENCE

|             |            |                      |                                                                                                                                  |
|-------------|------------|----------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos. | Finds nos. | Photo nos.           | Drawing nos.                                                                                                                     |
|             |            | #0502118<br>#0502119 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>#05159 |

**Basic process**

construction ☐ use ☐ disuse ☒

Date **18/10/17**

Initials **WK**

Checked by **J. A. B.**

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

THIS FILL CONTAINED NOT BIG NUMBER OF POTTERY BUT BIG VARIETY. DELICATE THIN WHEEL MADE PIECE (DRAWN BELOW); BIG PIECE OF SOME HAND-ONLY-MADE STORAGE HUGGE POT AND SOME SMALL PIECES OF ORDINARY-ORANGE/BLACK BITS, POORLY FIRED AND DAMAGED. ALSO ONE PIECE OF WELL DONE FLARING ORANGE POT. FOUND BONES RATHER SHATTERED.

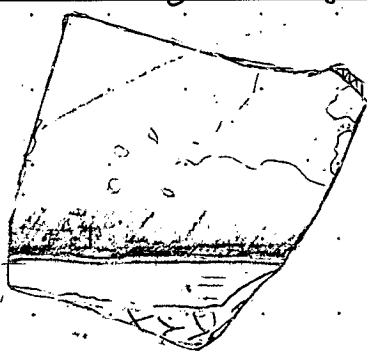
Fill of int [050996]. A moderately compact dark-yellowish grey sandy clay deliberate backfill.

Refer to context

[0502673]

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)



THIS PIECE OF POTTERY WERE VERY NICE, WELL FRED, HARD AND LIGHT. NATURAL COLOUR OF POT WERE WHITE BUT IT WAS INSIDE AND OUTSIDE PAINTED DARK BROWN



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 05</b> | Sub-area/Trench<br><b>A:1</b>     | Context number<br><b>[050998]</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context<br><b>[050998]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                                            |
|--|--|----------|--|--|--------------------------------------------|
|  |  | (050999) |  |  | Same as context<br><b>[052727]</b>         |
|  |  | [050998] |  |  | Cuts context<br><b>(050997)</b><br>0.51000 |
|  |  | (050997) |  |  | Cut by context                             |

### CUT

(if you are using this section score out section FILL/DEPOSIT below)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input checked="" type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                              | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input checked="" type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                             |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input checked="" type="checkbox"/> NW-SE                                                                                                                                                  |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input checked="" type="checkbox"/> steep<br><input checked="" type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |                              | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                             |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     |  | <b>Length</b><br><b>1M</b>                                                                                                                                                                                                                                                                                  | <b>Width</b><br><b>0.75M</b> | <b>Depth</b><br><b>0.55M</b>                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Diameter</b><br><b>—</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                  |  |                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                             |
|                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                             |

### FILL/DEPOSIT

(if you are using this section score out section CUT above)

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |  | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                     |  | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/><br>other* <input type="checkbox"/> |  | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in-situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b>                                                                                                                                                           |  | <b>Inclusions</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                          |  | stones* <input type="checkbox"/> chalk <input type="checkbox"/> iron pan <input type="checkbox"/> manganese <input type="checkbox"/> charcoal <input type="checkbox"/> plant remains* <input type="checkbox"/> wood <input type="checkbox"/> marine shell <input type="checkbox"/> bone* <input type="checkbox"/> pot <input type="checkbox"/> fired clay / CBM <input type="checkbox"/> CTP <input type="checkbox"/> mortar/plaster <input type="checkbox"/> leather/textile <input type="checkbox"/> glass <input type="checkbox"/> metal <input type="checkbox"/> industrial waste <input type="checkbox"/> lithics <input type="checkbox"/> coarse stone <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>frequency</b>                                                                                                                                                           |  | <b>bulk find</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

### CROSS REFERENCE

### Basic process

|                        |                       |                                                 |                                                                                                                                                          |
|------------------------|-----------------------|-------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>—</b> | Finds nos<br><b>—</b> | Photo nos<br><b>#0502118</b><br><b>#0502119</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>#D 05159</b> |
|------------------------|-----------------------|-------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date<br><b>18/10/17</b>                                                                                       |
| Initials<br><b>HK</b>                                                                                         |
| Checked by<br><b>L-B-S</b>                                                                                    |

This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Cut of curvilinear ditch, with steep edges, and concave base. It's truncating the ~~middle~~ of cut [052673]. This cut seems to be related to another curvilinear ditch located on its S side. The function of it is still unclear.

1. 0 2  
(110 0)

Refer to context

052673

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

|                          |                            |                                   |                                                                                                                        |
|--------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TERO5</b> | Sub-area/Trench<br><b>A 1</b>     | Context number<br><b>(050999)</b>                                                                                      |
| ECB#                     | Subgroup                   | Parent context<br><b>[050998]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

STRATIGRAPHIC MATRIX

STRATIGRAPHY

|  |  |                 |  |  |                 |   |
|--|--|-----------------|--|--|-----------------|---|
|  |  | <b>050996</b>   |  |  | Same as context | — |
|  |  | <b>(050999)</b> |  |  | Cuts context    | — |
|  |  | <b>[050998]</b> |  |  | Cut by context  | — |

CUT

(if you are using this section score out section FILL/DEPOSIT below)

DESCRIPTION

INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input checked="" type="checkbox"/> NW-SE<br><br><input checked="" type="checkbox"/> N                                                                    | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction-cut <input type="checkbox"/><br>robber-cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other CUT (describe below) <input type="checkbox"/> |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                         | <b>Width</b>                                                                                                                                                                                                                      | <b>Depth</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Diameter</b> |
| <b>Shape result of:</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                      |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

FILL/DEPOSIT

(if you are using this section score out section CUT above)

DESCRIPTION

INTERPRETATION

|                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                            | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/><br>other* <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input checked="" type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input checked="" type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |  |
| <b>Thickness</b><br><b>0.55M</b>                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
| stones*<br>chalk<br>iron pan<br>manganese<br>charcoal<br>plant remains*<br>wood<br>marine shell<br>bone*<br>pot<br>fired clay / CBM<br>CTP<br>mortar/plaster<br>leather/textile<br>glass<br>metal<br>industrial waste<br>lithics<br>coarse stone | frequency <b>M M O - F - - O F F F - - - O - - -</b><br>bulk find <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |

CROSS REFERENCE

Basic process

|            |                                                     |                                    |                                                                                                                                           |
|------------|-----------------------------------------------------|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos                                           | Photo nos                          | Drawing nos                                                                                                                               |
|            | <b>#F53162</b><br><b>PIECE OF</b><br><b>PIPSOLA</b> | <b>#0502118</b><br><b>#0502119</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>#D 05159</b> |

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date: <b>20/10/17</b>                                                                                         |
| Initials: <b>W.K.</b>                                                                                         |
| Checked by: <b>L.B.B.</b>                                                                                     |

# ADDITIONAL INFORMATION

(any further details that may be important for understanding the context, including items marked \* overleaf)

Fill of cut [050998]. A ~~med~~ dark-brownish-grey silty clay fill, moderately compact. The latter and the fact that it has a lot of waste material as inclusions point out that this was a deliberate backfill.

Refer to context

[052673]

## SKETCHES

(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

