

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                           |                                  |                                                                                                                        |
|-------------------------|---------------------------|----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA5</b> | Sub-area/Trench<br><b>AREA 2</b> | Context number<br><b>051700</b>                                                                                        |
| ECB #<br>—              | Subgroup<br>—             | Parent context<br><b>051700</b>  | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                              |
|--|--|-----------------|--|--|------------------------------|
|  |  | <b>(051699)</b> |  |  | Same as context —            |
|  |  | <b>051700</b>   |  |  | Cuts context <b>(051701)</b> |
|  |  | <b>(051701)</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 checked="" 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 checked="" 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>N/A</b>                                                                                                                          | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input type="checkbox"/> steep<br>L <input checked="" 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 checked="" type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>~ <input type="checkbox"/> complex* |                              |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br><b>7.3m</b>                                                                                                                                                                                                                                                                                   | <b>Width</b><br><b>0.90m</b>                                                                                                                                                                                                                             | <b>Depth</b><br><b>0.28m</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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>bulk find</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|                 |                |                                                       |                                                                                                                                                           |
|-----------------|----------------|-------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>/ | Finds nos<br>/ | Photo nos<br>0501321<br>0501327<br>0501331<br>0501332 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>04 D05357</b> |
|-----------------|----------------|-------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☒ use ☐ disuse ☐

Date **22/9/17**

Initials **JK**

Checked by **HH**

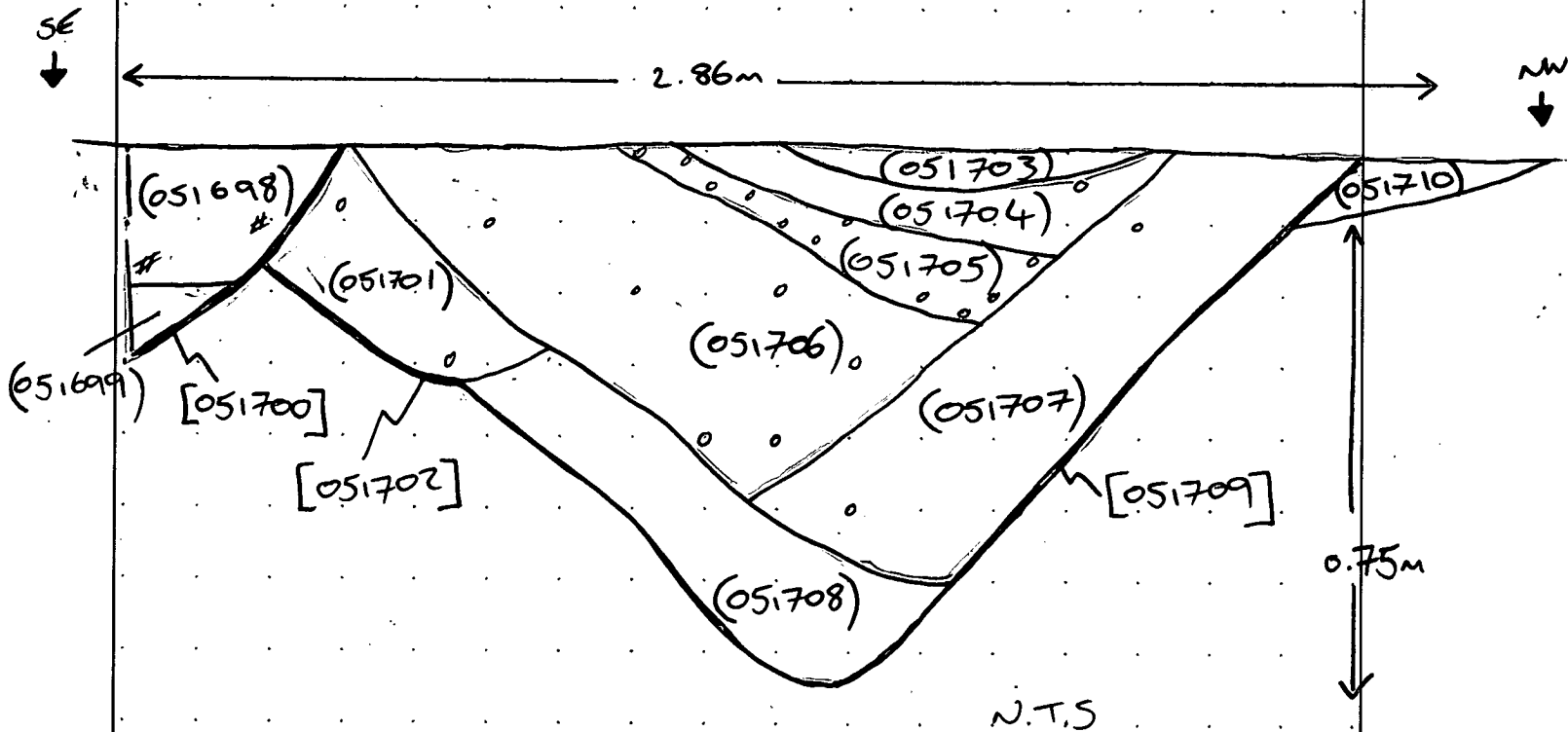
This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

Cut of Ring Ditch [051700]  
shown clearly in plan with upper dark fill  
(05698).  
cuts earlier NE-SW aligned gully [051702]  
to the NW

Refer to context 051709 - plan

SKETCHES

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



NORTH-EAST FACING SECTION SKETCH OF RING-DITCH  
[051700] GULLY [051702] & DITCH [051709]

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                            |                                  |                                                                                                                        |
|-------------------------|----------------------------|----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>AREA 2</b> | Context number<br><b>051701</b>                                                                                        |
| ECB #<br>—              | Subgroup<br>—              | Parent context<br><b>051702</b>  | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|               |               |               |                                               |
|---------------|---------------|---------------|-----------------------------------------------|
| <b>051700</b> | <b>051701</b> | <b>051702</b> | Same as context —                             |
|               | <b>051701</b> |               | Cuts context —                                |
|               | <b>051702</b> |               | Cut by context <b>051700</b><br><b>051702</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 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 checked="" 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 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 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>0.15m</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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |           |                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |         |              |          |           |                  |                |                |                 |       |       |                  |         |                |                 |       |       |                  |         |              |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <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>fired clay / 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></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 | O |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |           |                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |         |              |          |           |                  |                |                |                 |       |       |                  |         |                |                 |       |       |                  |         |              |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>bulk find</b> <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>/ | Finds nos<br>/ | Photo nos<br><b>0501321</b><br><b>0501322</b><br><b>0501331</b><br><b>0501332</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D# 005357</b> | Basic process<br>construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|                 |                |                                                                                   |                                                                                                                                                           | Date <b>22/9/17</b>                                                                                                            |
|                 |                |                                                                                   |                                                                                                                                                           | Initials <b>BK</b>                                                                                                             |
|                 |                |                                                                                   |                                                                                                                                                           | Checked by <b>HH</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")

PRIMARY / SINGLE SANDY-CLAY Fill with occ  
gravel at NE-SW ALIGNED Gully [051702]  
NATURALLY DEPOSITED BY WEATHERING  
Fill cut by Ring Ditch [051700] to SE &  
Ditch [051709] to NW

Refer to context: 051700 - section  
051709 - PLAN

## SKETCHES

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



## STRATIGRAPHY

|  |  |        |  |  |                   |
|--|--|--------|--|--|-------------------|
|  |  | 051701 |  |  | Same as context — |
|  |  | 051702 |  |  | Cuts context —    |
|  |  | 051352 |  |  | Cut by context    |

### 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><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                                      | Sides<br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input checked="" 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-right: 10px;">}</div> <div>sloping</div> </div> |                | Base<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* |          |
| Dimensions<br>in metres                                                                                                                                                                                                                                                               | Length<br>> 3m                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Width<br>0.65m | Depth<br>0.26m                                                                                                                                                                                                                        | Diameter |
| Shape result of (tick all that apply) (approx)<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"/>                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |                                                                                                                                                                                                                                       |          |

### INTERPRETATION

[illegible]

### Basic process

|                 |                |                                                       |                                                                                                                                                    |                                                                                                                                                               |
|-----------------|----------------|-------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>/ | Finds nos<br>/ | Photo nos<br>0501321<br>0501327<br>0501331<br>0501337 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D# D05357 | construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/><br>Date 22/9/17<br>Initials BC<br>Checked by HH |
|-----------------|----------------|-------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

Cut of NE-SW ALIGNED Gully [051702]  
CAN BE SEEN IN PLAN EXTENDING TO SW C.O.E  
Cut TO SE BY RING DITCH [051700] & TO NW BY  
[051709] DITCH.

051700-  
051709-

section

PLAN

## SKETCHES

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

[illegible]

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                            |                                  |                                                                                                                        |
|-------------------------|----------------------------|----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>AREA 2</b> | Context number<br><b>051703</b>                                                                                        |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>       | Parent context<br><b>051709</b>  | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                          |
|--|--|---------------|--|--|--------------------------|
|  |  | <b>051351</b> |  |  | Same as context <b>—</b> |
|  |  | <b>051703</b> |  |  | Cuts context <b>—</b>    |
|  |  | <b>051704</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<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 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 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 checked="" 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>0.06m</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                                                                                                                                                                             | 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>—</b> | Photo nos<br><b>0501321</b><br><b>0501322</b><br><b>0501331</b><br><b>0501332</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>04 D05357</b> |
|------------------------|-----------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☐ use ☐ disuse ☒

|            |                |
|------------|----------------|
| Date       | <b>22/9/17</b> |
| Initials   | <b>JK</b>      |
| Checked by | <b>HM</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)

UPPER most FILL of NE-SW aligned ditch

[051709]

FILL included occ. cbm, occ. pottery frags

& occ. A Bone (x 2 frags)

FILL is Dark & sub-circular in plan

Suggesting A Dumped in fill

Refer to context

051700-

section

051709-

plan

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>TEA5</b> | Sub-area/Trench<br><b>AREA 2</b> | Context number<br><b>051704</b>                                                                                        |
| ECB #<br>—              | Subgroup<br>—             | Parent context<br><b>051709</b>  | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                   |
|--|--|---------------|--|--|-------------------|
|  |  | <b>051703</b> |  |  | Same as context — |
|  |  | <b>051704</b> |  |  | Cuts context —    |
|  |  | <b>051705</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>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>/ <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 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<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 checked="" 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>0.09m</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 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>/ | Finds nos<br>/ | Photo nos<br>0501321<br>0501322<br>0501331<br>0501332 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D# 005357 |
|-----------------|----------------|-------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☐ disuse ☒

|            |                |
|------------|----------------|
| Date       | <b>22/9/17</b> |
| Initials   | <b>JK</b>      |
| Checked by | <b>HH</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)

Silty clay fill of NE-SW aligned ditch

[051709]

included occ. small gravels & occ. A. BONE  
(x3 teeth)

Fill was ~~shown~~ shown as dark & sub-circular  
in plan so likely to be a dumped fill in  
the upper part of ditch.

Refer to context: 051700 - section

SKETCHES

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

051709 - plan

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                           |                                 |                                                                                                                        |
|-------------------------|---------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA5</b> | Sub-area/Trench<br><b>AREA2</b> | Context number<br><b>051705</b>                                                                                        |
| ECB #<br>—              | Subgroup<br>—             | Parent context<br><b>051709</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                   |
|--|--|---------------|--|--|-------------------|
|  |  | <b>051704</b> |  |  | Same as context — |
|  |  | <b>051705</b> |  |  | Cuts context —    |
|  |  | <b>051706</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"/> |               |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               | <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 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 checked="" 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 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 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 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>0.19m</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                                                                                                                                                                             | <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>/ | Finds nos<br>/ | Photo nos<br>050321<br>050327<br>050133<br>0501332 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>0# 05357 |
|-----------------|----------------|----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                       |                |
|---------------------------------------------------------------------------------------------------------------------------------------|----------------|
| <b>Basic process</b><br>construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |                |
| Date                                                                                                                                  | <b>22/9/17</b> |
| Initials                                                                                                                              | <b>JK</b>      |
| Checked by                                                                                                                            | <b>HH</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)

Silty clay with freq. gravels of NE-SW aligned  
itch [051709]  
Likely washed in fill from weathering

## SKETCHES

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

| Refer to context: 051700 - | section SKETCHES<br><small>(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)</small> |
|----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| 051709 -                   | plan                                                                                                                                             |



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                            |                                  |                                                                                                                        |
|-------------------------|----------------------------|----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>AREA 2</b> | Context number<br><b>051706</b>                                                                                        |
| ECB #<br>—              | Subgroup<br>—              | Parent context<br><b>051709</b>  | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                   |
|--|--|---------------|--|--|-------------------|
|  |  | <b>051705</b> |  |  | Same as context — |
|  |  | <b>051706</b> |  |  | Cuts context —    |
|  |  | <b>051707</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>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>] <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"/> 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 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>0.31m</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> | Finds nos<br> | Photo nos<br><b>0501321</b><br><b>0501322</b><br><b>0501331</b><br><b>0501332</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D# 005357</b> |
|----------------|---------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------|
| <b>Basic process</b><br>construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>22/9/17</b>                                                                                                                   |
| Initials <b>JK</b>                                                                                                                    |
| Checked by <b>HM</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 \* overhead)

TERTIARY SILTY CLAY Full with mod - freq. small angular & sub - rounded gravels & mod. chalk clasts.  
Slumped in fill deposited by weathering.

0.51700 - section

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

05,709 - PLAN

051709 - PLAN

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                  |                                                                                                                        |
|-------------------------|----------------------------|----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>AREA 2</b> | Context number<br><b>051707</b>                                                                                        |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>       | Parent context<br><b>051709</b>  | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                          |
|--|--|---------------|--|--|--------------------------|
|  |  | <b>051706</b> |  |  | Same as context <b>—</b> |
|  |  | <b>051707</b> |  |  | Cuts context <b>—</b>    |
|  |  | <b>051708</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 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 checked="" 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 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 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>0.35m</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency <b>O</b> <b>O</b> <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"/> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 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>0501321</b><br><b>0501322</b><br><b>0501331</b><br><b>0501332</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D# D05357</b> |
|------------------------|-----------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☐ disuse ☒

|            |                |
|------------|----------------|
| Date       | <b>22/9/17</b> |
| Initials   | <b>JK</b>      |
| Checked by | <b>HH</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")

SECONDARY, SANDY CLAY fill with ooc - mod.  
small angular gravels of NE-SW aligned  
ditch [051709]  
slumped in filling deposited naturally by  
weathering

Refer to context:

051700

section

051709

PLAN

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>TEA5</b> | Sub-area/Trench<br><b>AREA 2</b> | Context number<br><b>051708</b>                                                                                        |
| ECB #<br>—              | Subgroup<br>—             | Parent context<br><b>051709</b>  | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                   |
|--|--|---------------|--|--|-------------------|
|  |  | <b>051707</b> |  |  | Same as context — |
|  |  | <b>051708</b> |  |  | Cuts context —    |
|  |  | <b>051709</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>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>S <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>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>Diameter</b>                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## 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 checked="" 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 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 type="checkbox"/> silt<br>sandy <input type="checkbox"/> <input checked="" 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 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>0.35m</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>✓ | Finds nos<br>✓ | Photo nos<br>0501321<br>0501327<br>0501331<br>0501332 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D# D05357 | Basic process<br>construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/><br>Date <b>22/9/17</b><br>Initials <b>SK</b><br>Checked by <b>HH</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")

PRIMARY, LOOSE, SANDY fill with occ gravels  
at NE-SW aligned Ditch [051709]  
Naturally deposited by weathering

Refer to context: 051700 - section  
051709 - PLAN

## SKETCHES

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

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                           |                                  |                                                                                                                        |
|-------------------------|---------------------------|----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A.4</b> | Area/Field<br><b>TEAS</b> | Sub-area/Trench<br><b>AREA 2</b> | Context number<br><b>05.709</b>                                                                                        |
| ECB #<br>—              | Subgroup<br>—             | Parent context<br><b>05.709</b>  | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |               |  |                                                 |
|--|--|---------------|---------------|--|-------------------------------------------------|
|  |  | <b>05.708</b> |               |  | Same as context —                               |
|  |  | <b>05.709</b> |               |  | Cuts context <b>(05.701)</b><br><b>(05.710)</b> |
|  |  | <b>05.701</b> | <b>05.710</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 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 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<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>/ <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>&gt; 3m</b>                                                                                                                                                                                                                                                                        | <b>Width</b><br><b>2.10m</b>                                                                                                                                                                                                                             | <b>Depth</b><br><b>0.75m</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"/><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><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 pits</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 pits                | 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 pits                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 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

|                 |                |                                                                                   |                                                                                                                                                          |                                                                                                                                                                                                     |
|-----------------|----------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>/ | Finds nos<br>/ | Photo nos<br><b>0501321</b><br><b>0501327</b><br><b>0501331</b><br><b>0501332</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>04005357</b> | Basic process<br>construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/><br>Date <b>22/9/17</b><br>Initials <b>BK</b><br>Checked by <b>HH</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

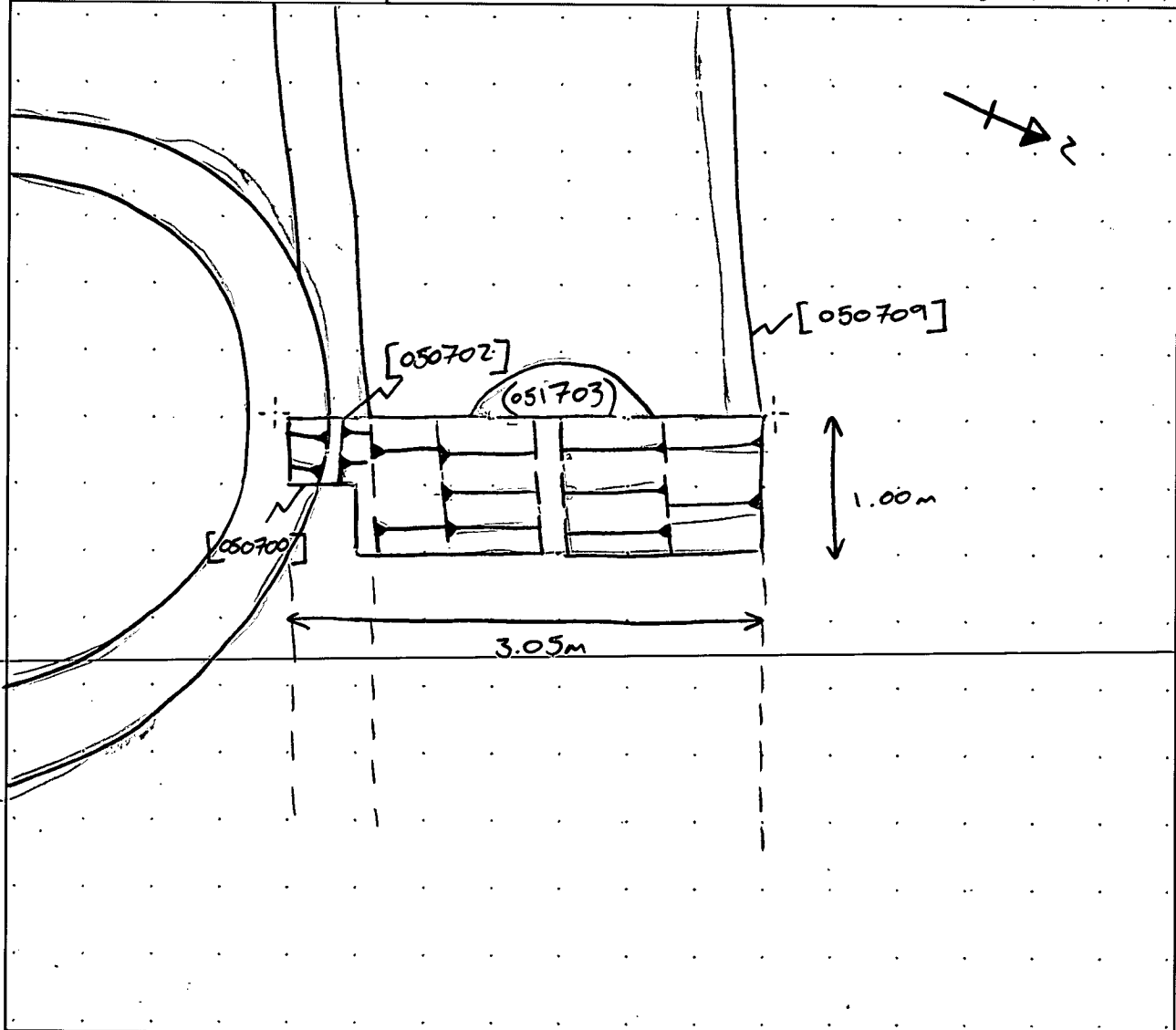
(any further details that may be important for understanding the context, including items marked "overleaf")

V-shaped cut of DITCH aligned SW-NE  
 EXTENDING TO SW C.O.E  
 Cuts earlier Gully ~~050~~ [051702] TO THE SE.  
 PROBABLE BOUNDARY DITCH.

Refer to context 051700 - section

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>TEA5</b> | Sub-area/Trench<br><b>AREA 2</b> | Context number<br><b>051710</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>051709</b> |  |  | Same as context <b>051352</b> |
|  |  | <b>051710</b> |  |  | Cuts context <b>—</b>         |
|  |  | <b>051352</b> |  |  | Cut by context <b>051709</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>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 checked="" 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 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 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 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>0.07m</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 <b>O</b>                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| bulk find                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|                        |                       |                                                                                   |                                                                                                                                                          |
|------------------------|-----------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>—</b> | Finds nos<br><b>—</b> | Photo nos<br><b>0501321</b><br><b>0501322</b><br><b>0501331</b><br><b>0501332</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D#005357</b> |
|------------------------|-----------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☒ disuse ☐

|            |                |
|------------|----------------|
| Date       | <b>22/9/17</b> |
| Initials   | <b>BK</b>      |
| Checked by | <b>HH</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 thin, sandy clay alluvium  
deposit with occ - med small angular  
gravels.  
cut by NE-SW aligned ditch [051709]

Refer to context

051700 - section  
051709 - plan

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>2</b>     | Context number<br><b>(051711)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>051713</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>051351</b> |  |  | Same as context |
|  |  | <b>051711</b> |  |  | Cuts context    |
|  |  | <b>051712</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"/> |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               | <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>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 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>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>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 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 type="checkbox"/> clay <input type="checkbox"/><br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input checked="" 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 type="checkbox"/></p> <p>dumped layer <input type="checkbox"/></p> <p>deliberate backfill <input checked="" 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><br><b>0.44</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                                                                                                                                                              | O<br><input checked="" type="checkbox"/>                                                                                                                                                                                                         | O<br><input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | O<br><input type="checkbox"/> | M<br><input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                       | M<br><input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |

### CROSS REFERENCE

### Basic process

construction ☐ use ☒ disuse ☐

|                              |                            |                                                                         |                                                                                                                                                                                |
|------------------------------|----------------------------|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S 05228</b> | Finds nos<br><b>052018</b> | Photo nos<br><b>0501245,<br/>0501349-50,<br/>0501427<br/>0501494-95</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>05356/05368</b><br><b>SHEET 27</b> |
|------------------------------|----------------------------|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|            |                |
|------------|----------------|
| Date       | <b>26.9.17</b> |
| Initials   | <b>L.C.</b>    |
| Checked by | <b>LM</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)

DELIBERATE BACKFILL CONTAINING LOT OF ANIMAL BONES (PARTS OF SHEEP, COW AND ONE JAW OF HORSE) AND POTTERY (SOME FRAGMENTS SHOW US INCISIONS AND DECORATIONS); IT HAS BEEN FOUND EVEN A SMALL FLINT (FS2018).

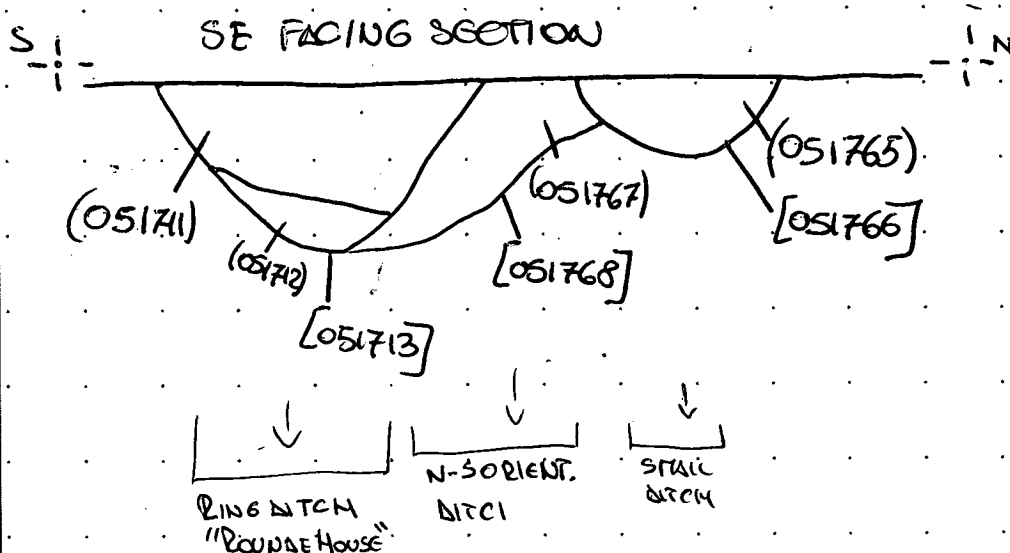
THIS IS THE LAST INFILLING THAT WE SEE IN THE DITCH; IT COVERS ONE OTHER FILL (051712)

IN THE FILL WERE CONSERVED, EVEN, SOME BURIAL STONES (SOME CIRCULAR, SOME ONE STALL AND PLATES) PROBABLY CONNECTED WITH SOME FIRESIDE, THAT ONCE THE FIRE WAS OUT, THEY USED TO FILL THE DITCH

Refer to context

## SKETCHES

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



## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 051711 |  |  | Same as context |
|  |  | 051712 |  |  | Cuts context    |
|  |  | 051713 |  |  | 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><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>Length Width Depth Diameter<br>in metres |  |
| <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

|                                                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                                                |          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------|------|--------------|-------|-----|------------------|-----|----------------|-----------------|-------|-------|------------------|---------|--------------|--|
| <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"/> <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>bluish <input type="checkbox"/> <input type="checkbox"/> blue |          | <b>Composition</b><br>clayey <input type="checkbox"/> <input type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> <input type="checkbox"/> silt<br>sandy <input type="checkbox"/> <input checked="" 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>0.30                                                                                                                                                              |         | 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       | O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                                                                | O        |                |      |              |       |     |                  |     |                |                 |       | ✓     |                  | ✓       |              |  |
| bulk find                                                                                                                                                                             |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                                                |          |                |      |              |       |     |                  |     |                |                 |       | ✓     |                  | ✓       |              |  |

### Basic process

| Sample nos          | Findings nos | Photo nos                             | Drawing nos                                                                                                                                        |
|---------------------|--------------|---------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| F. <del>05231</del> | S05237       | 0501245,<br>0501349-50,<br>0501494-95 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>05356, 05368<br>SHEET 27 |
| F. 52015,           |              |                                       |                                                                                                                                                    |
| F. 52016,           | 7            |                                       |                                                                                                                                                    |

construction ☐ use ☒ disuse ☐

|            |         |
|------------|---------|
| Date       | 26.9.18 |
| Initials   | L.C.    |
| Checked by | HH      |

# ADDITIONAL INFORMATION

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

THE FIRST DELIBERATE BACKFILL OF THE RING NICH IS COMPOSED BY A SILTY-SAND SOIL THROWN IN FROM THE SOUTHERN EDGE OF THE NICH (LOOK AT THE PROFILE AND TO THE INCLINATION OF THE LAYER) ...

THE LAYER IS A LITTLE BIT COMPOSED BY A MIXED SOIL WITH SOME GRAVEL AND ROUND STONES TOO. THIS WERE PROBABLY RELATED TO AN EXTINGUISHED FIRE USED NEARLY DURING OR BEFORE THE DIGGING OF THE NICH. IT HAS BEEN FOUND ONE FRAGMENT OF IRON NAIL, ONE DECORATED STALL STONE (?) AND A DEBITAGE-FLINT. IT HAS BEEN FOUND POT AND ANIMAL BONES.

Refer to context <sup>982</sup> (051711)

## SKETCHES

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






|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA 5      | 2               | [051713]                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            |                 | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY.

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 051712 |  |  | Same as context |
|  |  | 051713 |  |  | Cuts context    |
|  |  | 051767 |  |  | Cut by context  |

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                     |                |                                                                                                                                                                                                                                                                                   |               |          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------|
| Shape <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"/> |                |                                                                                                                                                                                                                                                                                   |               |          |
| Orientation<br><input checked="" type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br>                                                     |                | Sides<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* |               |          |
|                                                                                                                                                                                                                                                                                                     |                | Base<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*                                             |               |          |
| Dimensions<br>in metres                                                                                                                                                                                                                                                                             | Length<br>2.00 | Width<br>0.87                                                                                                                                                                                                                                                                     | Depth<br>0.50 | Diameter |
| Shape result of (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"/>                                          |                |                                                                                                                                                                                                                                                                                   |               |          |

## DESCRIPTION

# INTERPRETATION

| Compaction                                                         |                          | Colour                             |                                | Composition                     |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|--------------------------------------------------------------------|--------------------------|------------------------------------|--------------------------------|---------------------------------|----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                   |                          | light <input type="checkbox"/>     | mid <input type="checkbox"/>   | dark <input type="checkbox"/>   | mottled <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> moderately compact                        |                          | brownish <input type="checkbox"/>  |                                | brown <input type="checkbox"/>  |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                     |                          | greyish <input type="checkbox"/>   |                                | grey <input type="checkbox"/>   |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> friable                                   |                          | orangeish <input type="checkbox"/> |                                | orange <input type="checkbox"/> |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                    |                          | yellowish <input type="checkbox"/> |                                | yellow <input type="checkbox"/> |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                    |                          | reddish <input type="checkbox"/>   |                                | red <input type="checkbox"/>    |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                    |                          | blueish <input type="checkbox"/>   |                                | blue <input type="checkbox"/>   |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                    |                          | black <input type="checkbox"/>     | white <input type="checkbox"/> | other* <input type="checkbox"/> |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b>                                                   |                          |                                    |                                |                                 |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <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                                                          |                          |                                    |                                |                                 |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 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 checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
|            |           | 0501245,  | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>05356, 05368<br>SHEET 27 | Date 26.9.17<br>Initials L.C.<br>Checked by MM                                                                |

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



# ADDITIONAL INFORMATION

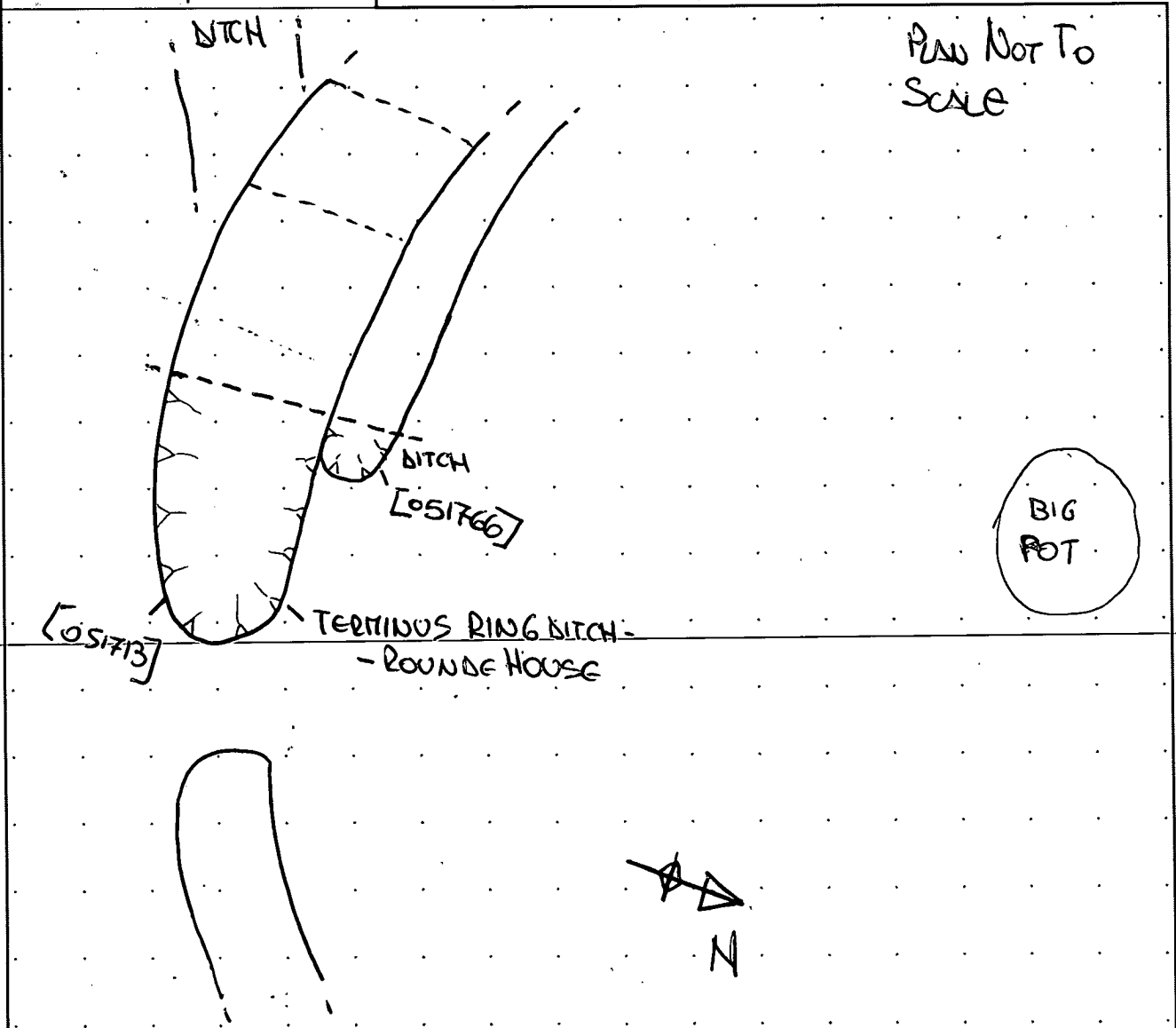
(any further details that may be important for understanding the context, including items marked \*overleaf)

WEASTERN "TERMINUS" OF THE RING NITCH EXCAVATED FOR THE FOUNDATION OF THE ROUND HOUSE LOCATED HERE. WE ARE IN CORRESPONDENCE TO THE ENTRANCE, PROBABLY, OF THE HOUSE. THE NG OF THE RING NITCH HAS CUT THE ~~EL~~ FILL OF A PREVIOUS NORTH-SOUTH ORIENTATED NITCH LOCATED IN THIS POINT. THE RING NITCH HAS TO BE CONSIDERATE LIKE A RE-FOUNDATION OF A NEW HOUSE, THAT PROBABLY EXTENDED AN ANCIENT A SMALL ONE THAT WE CAN SEE IN THE CUT OF THE NEAREST NITCH ([051766]).

Refer to context

## SKETCHES

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





## STRATIGRAPHY

|  |  |          |  |  |                          |
|--|--|----------|--|--|--------------------------|
|  |  | (051751) |  |  | Same as context (052067) |
|  |  | (051714) |  |  | Cuts context             |
|  |  | (051739) |  |  | 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="text"/> |  |
| <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>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"/> |
| 505233     | /         | 0501368<br>0501369 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05368 4 | Date 26/9/11<br>Initials J.O.S.<br>Checked by HM                                                              |

# ADDITIONAL INFORMATION

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

Fill (051714) of pit [051715], It is a sandy-clay fill that is situated above the ditch. fill (051739), on the top of the ditch. This fill is a bit dark, with pottery, bones, CBM and charcoals. Due to its finds and composition it probably would be a deliberate backfill that was thrown in the ditch once it fell into disuse.

Refer to context [051715] For PLAN [052061]

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

DP05365.1

SFAC. SECT.

DP05365.2

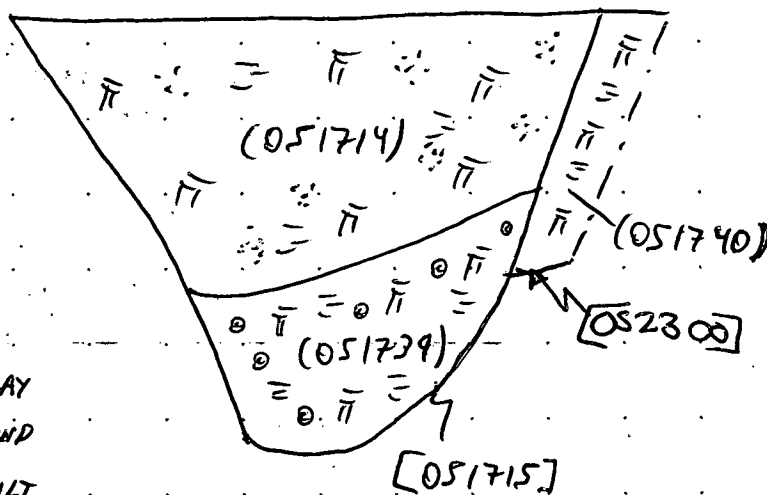
KEY

[π] CLAY

[••] SAND

[≡] SILT

[⊙⊙] CHALK



# 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>[051715]</b>                                                                                      |
| ECB#                    | Subgroup                    | Parent context<br><b>[051715]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                                                    |
|--|--|-----------------|--|--|----------------------------------------------------|
|  |  | <b>(051739)</b> |  |  | Same as context <b>[051719]</b><br><b>[052070]</b> |
|  |  | <b>[051715]</b> |  |  | Cuts context <b>(051740)</b>                       |
|  |  | <b>(051740)</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 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 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                                                                                                                          | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input checked="" 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>I <input checked="" 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><br><b>1.10</b>                                                                                                                                                                                                                                                                           | <b>Width</b><br><b>0.76</b>                                                                                                                                                                                                                              | <b>Depth</b><br><b>0.53</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 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>                                                                                                                                                           | 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* <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"/> |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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>0501368</b><br><b>0501369</b><br><b>0501449</b><br><b>0501450</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>005360 4</b> |

|            |                |
|------------|----------------|
| Date       | <b>26/9/17</b> |
| Initials   | <b>J.O.S.</b>  |
| Checked by | <b>HH</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 [051715] of Ditch. This is the terminus of a semicircular ditch, which is filled in this part by two fills: (051714) and (051739). This ditch is cutting a deposit that looks to finish just in this ditch. It could be made to create a fence <sup>(051740)</sup> in order to protect an activity area, which would be where the deposit (051740) is.

Refer to context

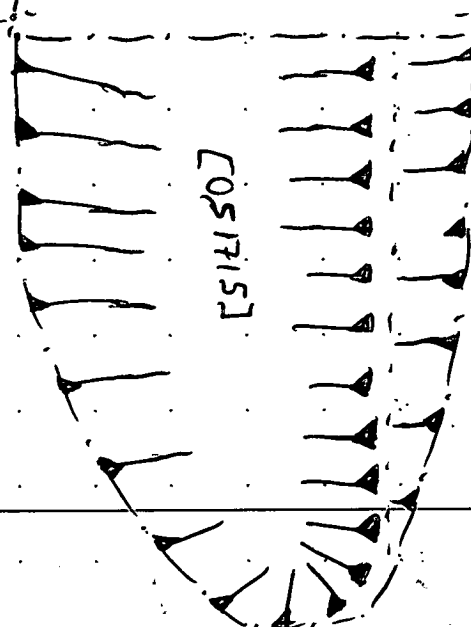
## SKETCHES

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

(051714) For section  
[051715] For plan  
~~[051715] For plan~~

DPO5365.1

DPO5365.2



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                            |                              |                                                                                                                        |
|-------------------------|----------------------------|------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A16</b> | Area/Field<br><b>7EA-S</b> | Sub-area/Trench<br><b>A2</b> | Context number<br><b>051716</b>                                                                                        |
| ECB#                    | Subgroup                   | Parent context               | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                 |  |
|--|--|---------------|--|--|-----------------|--|
|  |  | <b>051717</b> |  |  | Same as context |  |
|  |  | <b>051716</b> |  |  | Cuts context    |  |
|  |  | <b>051352</b> |  |  | Cut by context  |  |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                               |               |                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------|
| <b>Shape</b>                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                               |               |                 |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input checked="" type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                               |               |                 |
| <b>Orientation</b>                                                                                                                                                                                                                                                                      | <b>Sides</b>                                                                                                                                                                                                                                                                     | <b>Base</b>                                                                                                                                                                                                                   |               |                 |
| <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* |               |                 |
| <b>Dimensions</b>                                                                                                                                                                                                                                                                       | <b>Length</b>                                                                                                                                                                                                                                                                    | <b>Width</b>                                                                                                                                                                                                                  | <b>Depth</b>  | <b>Diameter</b> |
| in metres                                                                                                                                                                                                                                                                               | <b>2.23 m</b>                                                                                                                                                                                                                                                                    | <b>0.28 m</b>                                                                                                                                                                                                                 | <b>0.74 m</b> |                 |
| <b>Shape result of (tick all that apply)</b>                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                               |               |                 |
| 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 checked="" 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

|                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b>                                                                                                                                     | <b>Colour</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Composition</b>                                                                                                                                                                                                                                                                                                                 |
| <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"/>                                                                                                                                       | 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"/> |
| <b>Thickness</b>                                                                                                                                      | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                    |
| <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>                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                    |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <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

|                   |                  |                                                                      |                                                                                                                                        |
|-------------------|------------------|----------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| <b>Sample nos</b> | <b>Finds nos</b> | <b>Photo nos</b>                                                     | <b>Drawing nos</b>                                                                                                                     |
|                   |                  | <b>0501620</b><br><b>0501621</b><br><b>0501622</b><br><b>0501623</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>05391</b> |

### Basic process:

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse |
| <b>Date</b> <b>29/9/17</b>                                                                                               |
| <b>Initials</b> <b>JG</b>                                                                                                |
| <b>Checked by</b> <b>HN</b>                                                                                              |

# ADDITIONAL INFORMATION

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

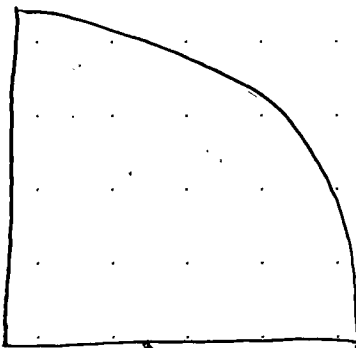
THIS A CUT OF DITCH [051716]. THIS IS A TERNARY OF A LARGE DITCH  
IT IS PROBABLY A PART OF A FIELD BOUNDARY SYSTEM OR DRAINAGE  
CHANNEL. ~~THE DITCH IS VERY DEEP~~ THE FEATURE IS VERY DEEP AND THERE  
ARE SOME FENDS (BONES AND POTTERY).

ETA: ORIGINALLY WE THOUGHT THIS WAS A PIT  
DUE TO A LARGE OVAL OF DARK FILL ON  
THE SURFACE. IT TURNED INTO A DITCH AND  
POSSIBLY THE CONTINUATION OF THE ONE  
FEEDING IN FROM THE EAST OF THE SITE

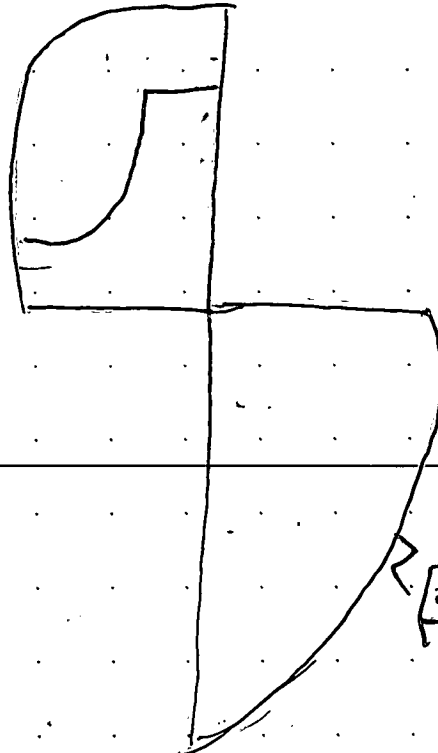
Refer to context

## SKETCHES

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



[051882]



[051716]



|                          |                            |                               |                                                                                                                        |
|--------------------------|----------------------------|-------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A-12</b> | Area/Field<br><b>TCA-5</b> | Sub-area/Trench<br><b>A-2</b> | Context number<br><b>051717</b>                                                                                        |
| ECB #                    | Subgroup                   | Parent context                | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>051718</b> |  |  | Same as context |
|  |  | <b>051717</b> |  |  | Cuts context    |
|  |  | <b>051716</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<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"/>                                       |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| (This section is crossed out with a large diagonal line)                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

**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 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 <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 checked="" 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>0.11 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                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency <b>O</b>                                                                                                                                                                    | bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| (This section is crossed out with a large diagonal line)                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

**CROSS REFERENCE**

|            |           |                                                                      |                                                                                                                                        |
|------------|-----------|----------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                                            | Drawing nos                                                                                                                            |
|            |           | <b>0501620</b><br><b>0501621</b><br><b>0501622</b><br><b>0501623</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>0539A</b> |

**Basic process**

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>29/9/17</b>                                                                                           |
| Initials <b>JC</b>                                                                                            |
| Checked by <b>HM</b>                                                                                          |



# ADDITIONAL INFORMATION

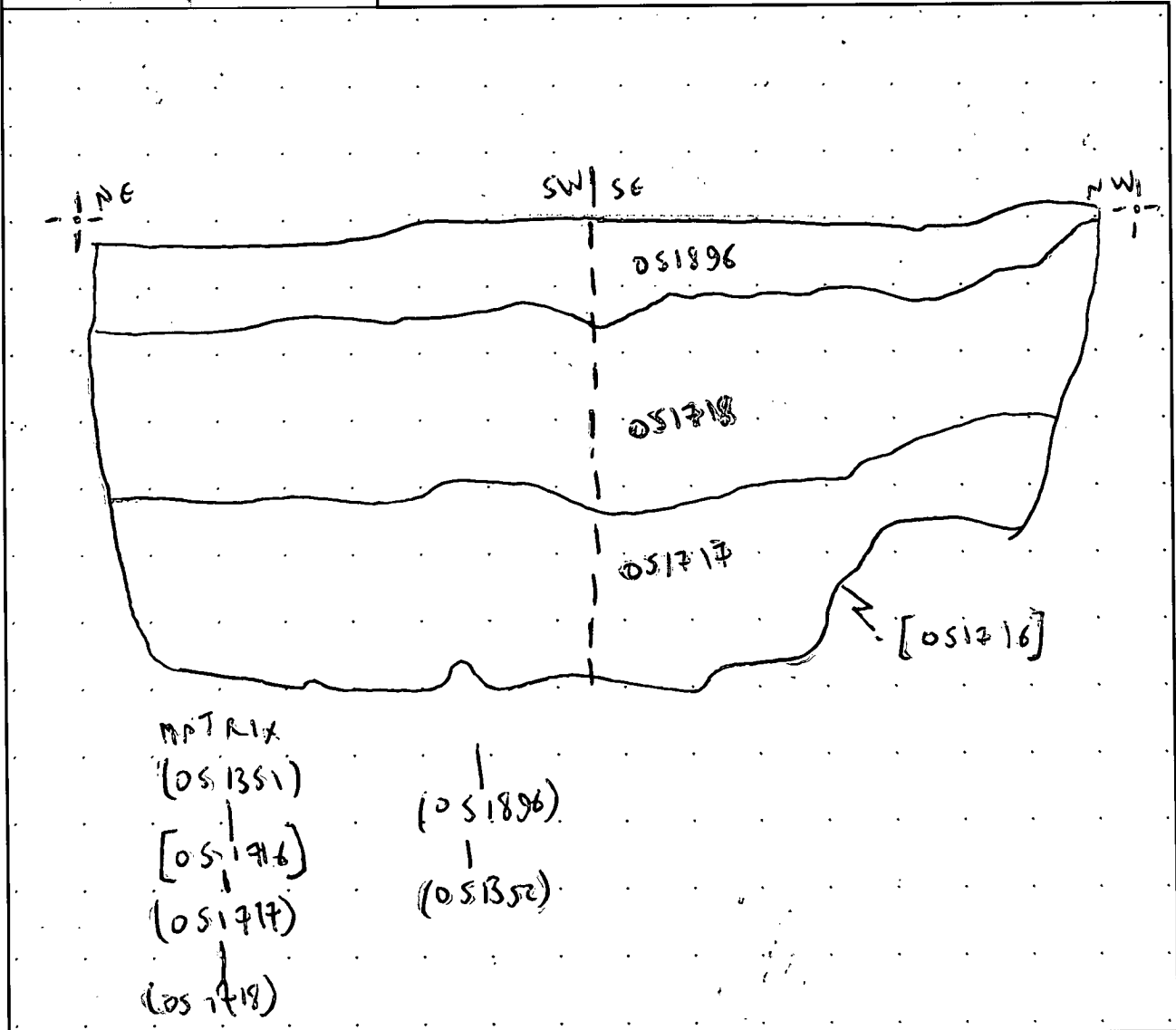
(any further details that may be important for understanding the context, including items marked \* overleaf)

THIS IS THE FIRST PIN (051717) OF THE DITCH [051716]. THE SKETCH  
INCLUDES SOME CARPACAL AND SOME UNFOLDED COLUMBIA OR ADV  
CHEROKEE STOPS PROBABLY CAUSED BY THE WATER OR RAIN EVENTS.

## SKETCHES

Refer to context

(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>TEA-S</b> | Sub-area/Trench<br><b>A 2</b> | Context number<br><b>051919</b>                                                                                        |
| ECB#                     | Subgroup                   | Parent context                | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>051896</b> |  |  | Same as context |
|  |  | <b>051718</b> |  |  | Cuts context    |
|  |  | <b>051717</b> |  |  | Cut by context  |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                    |              |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|
| <b>Shape</b>                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                    |              |                 |
| 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>                                                                                                                                                                                                                                                           | <b>Sides</b>                                                                                                                                                                                                                                                          | <b>Base</b>                                                                                                                                                                                                        |              |                 |
| <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"/> 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* |              |                 |
| <b>Dimensions</b>                                                                                                                                                                                                                                                            | <b>Length</b>                                                                                                                                                                                                                                                         | <b>Width</b>                                                                                                                                                                                                       | <b>Depth</b> | <b>Diameter</b> |
| in metres                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                    |              |                 |
| <b>Shape result of</b> (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

|                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <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><br>brownish <input checked="" 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"/> | 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 |
| <b>Thickness</b>                                                                                                                                                 | <b>Other*</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                      |
| <b>0, 1mm</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                                                                                                                                                        | <b>0</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>0</b>                                                                                                                                                                                                                                             |
| bulk find                                                                                                                                                        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <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 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

|                   |                  |                                                                      |                                                                                                                                            |
|-------------------|------------------|----------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Sample nos</b> | <b>Finds nos</b> | <b>Photo nos</b>                                                     | <b>Drawing nos</b>                                                                                                                         |
|                   |                  | <b>0501620</b><br><b>0501621</b><br><b>0501622</b><br><b>0501623</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><br><b>05394</b> |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>29/9/14</b>                                                                                           |
| Initials <b>JG</b>                                                                                            |
| Checked by <b>MA</b>                                                                                          |

# ADDITIONAL INFORMATION

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

THIS IS THE SECOND FILL (OS1718) OF THE DITCH [OS1716]. IT CONTAINS  
 VERY MUCH CHALK, AND SOME OF UNSELECTED COARSE OR FINE-  
 IN STONES PROBABLY CARRIED BY THE WATER OR RAIN EVENTS. THERE  
 ARE ALSO SOME SANDY LAYERS, PUT AND FINE CLAY.

## SKETCHES

Refer to context

OS1717

(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      | 2               | [051719]                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
| -         | -          | [051719]        | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |          |  |                                           |
|--|--|----------|----------|--|-------------------------------------------|
|  |  | (051778) |          |  | Same as context [05175]                   |
|  |  | [051719] |          |  | Cuts context <del>[051781]</del> (051781) |
|  |  | (051781) | (051782) |  | 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 type="checkbox"/> linear <input 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>I <input type="checkbox"/> N-S<br>H <input type="checkbox"/> E-W<br>↗ <input type="checkbox"/> NE-SW<br>↘ <input checked="" type="checkbox"/> NW-SE<br>N<br>↑                                                                                                                                | <b>Sides</b><br>] <input checked="" 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 checked="" 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><br>7                                                                                                                                                                                                                                                                                     | <b>Width</b><br>665                                                                                                                                                                                                                                      | <b>Depth</b><br>062 | <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>-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <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

|                        |                       |                                                        |                                                                                                                                                                          |                                                                                                               |
|------------------------|-----------------------|--------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| <b>sample nos</b><br>- | <b>kinds nos</b><br>- | <b>Photo nos</b><br>050497/8<br>050424/6<br>(SEM EXC.) | <b>Drawing nos</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>DW #205370<br>DW #205358 | construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| <b>Date</b> 26/09/17   |                       |                                                        |                                                                                                                                                                          | <b>Initials</b> J.M.S.A.                                                                                      |
| <b>Checked by</b> HM   |                       |                                                        |                                                                                                                                                                          |                                                                                                               |

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)

TO SUM UP, THIS DITCH WAS LIKELY MADE DURING THE IRON AGE PERIOD OR BEFORE AS A WAY TO CLOSE / LIMIT THE SPACE INTO IT AND WAS RE-USED AS A DUMPED / GARBAGE LAYER.

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

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                        |                            |                                   |                                                                                                                        |
|------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A4</b> | Area/Field<br><b>TEA05</b> | Sub-area/Trench<br><b>2</b>       | Context number<br><b>(051720)</b>                                                                                      |
| ECB#<br><b>-</b>       | Subgroup<br><b>-</b>       | Parent context<br><b>[051719]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |          |
|--|--|-----------------|--|--|-----------------|----------|
|  |  | <b>(051721)</b> |  |  | Same as context | <b>-</b> |
|  |  | <b>(051720)</b> |  |  | Cuts context    | <b>-</b> |
|  |  | <b>(051778)</b> |  |  | Cut by context  | <b>-</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

Sides

☐ vertical  
☐ steep  
☐ moderate sloping  
☐ 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 ☐

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

**0'15**

black ☐ white ☐ other\* ☐

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 **F 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) ☐

## CROSS REFERENCE

|            |                            |                                                                 |                                                                                                                                                                                                   |
|------------|----------------------------|-----------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos<br><b>F52019</b> | Photo nos<br><b>0501497/8</b><br><b>0501424/6</b><br>(semi ex.) | Drawing nos <b>SHEET 25</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>DW # <b>D05370</b><br>DW # <b>D05358</b> |
|------------|----------------------------|-----------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☒ disuse ☐

Date **26/09/17**

Initials **J.H.S.A**

Checked by **HM**

# ADDITIONAL INFORMATION

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

THIS CONTEXT (051720) IS THE FILL OF A SUB-CIRCULAR DITCH.  
BASE ON THE COMPOSITION AND THE SHAPE THIS FILL LOOKS LIKE A  
LAYER FORMED BY NATURAL INFILLING BUT, THE PRESENCE OF THIS FILL ADDED  
TO THE DISCOVERY OF A PIECE OF WORKED FLINT IN IT, SUPPORT THE THEORY  
OF THE BACKFILL INTENTIONALLY THROWN TO LEVEL THE GROUND OR MAYBE  
PREPARE THE HOLE FOR THE NEXT USE.  
TO DATE THIS FILL THE ONLY EVIDENCE FOUND IS THE PIECE OF WORKED  
FLINT BUT IN RELATION WITH THE DITCH IT IS POSSIBLE TO AFFIRM THAT  
WAS FORMED DURING THE IRON AGE.

Refer to context [051719]

## 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      | 2               | (051721)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
| -         | -          | [05419]         | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|          |       |                 |   |
|----------|-------|-----------------|---|
| (051351) | subs. | Same as context | - |
| (051721) |       | Cuts context    | - |
| (051720) |       | 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 <input type="checkbox"/>                                                                                                |  | <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 (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 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 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 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 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>0.26                                                                                                                                                              |   | 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

### Basic process

construction ☐ use ☐ disuse ☐

Date 26/09/17

Initials J.M.S.A.

Checked by HH

|            |           |                                      |                                                                                                                                                      |
|------------|-----------|--------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                            | Drawing nos                                                                                                                                          |
| 505234     |           | 050149718<br>050142416<br>(SEM EXL.) | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>DW # 005370<br>DW # 005358 |

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

# ADDITIONAL INFORMATION

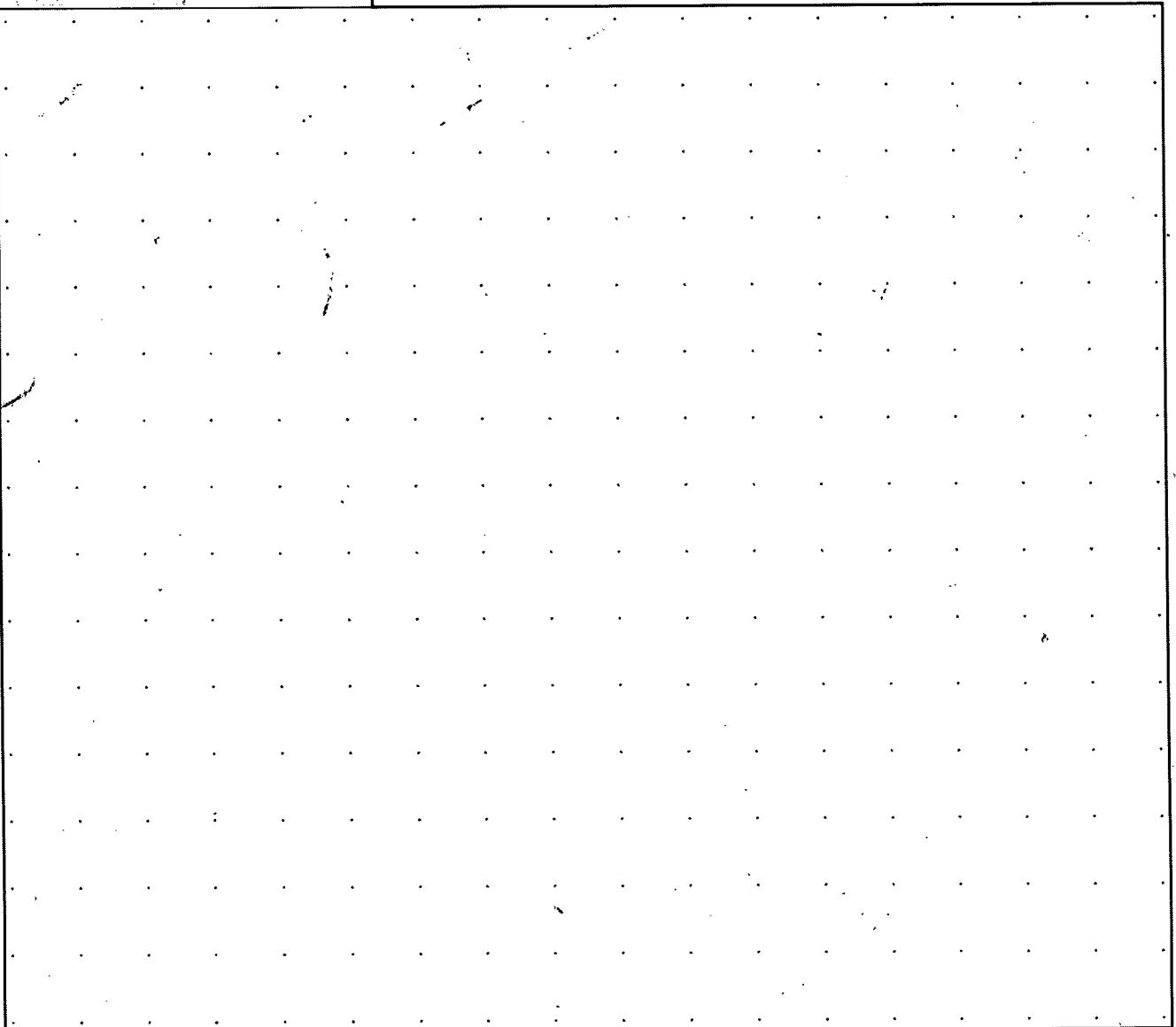
(any further details that may be important for understanding the context, including items marked \*overleaf)

THIS CONTEXT (051721) IS THE TOP FILL OF A SUB-CURVILINEAR DITCH. THE DARK GREYISH BROWN SOIL AS THE MANY INCLUSIONS IN IT SUGGEST A LAYER FORMED AS A DELIBERATE BACKFILL. WERE RECOVERED INTO THIS FILL A LOT OF POTTERY SHERDS OF SEVERAL POT WITH A BIG SIZE AND A ~~SEA~~ DECORATION PATTERN BASE ON INCLUSIONS, THAT INDICATES A EARLY/MIDDLE IRON AGE CHRONOLOGY. THERE WERE SOME ANIMAL BONES, MOSTLY BELONGING TO SMALL ANIMALS, A FEW OF THEM BURNT. THE EVIDENCES OF BURNT MATERIALS ARE CONFIRM BY SEVERAL FIRECRACKED STONES AND SOME FRIED CLAY/ADOBE. THE ACCUMULATION OF MATERIALS OF ARCHAEOLOGICAL NATURE ADDED TO THE POSITION IN WHICH WERE FOUND AND THE SHAPE OF THIS DITCH, SUPPORT THE THEORY OF THE DELIBERATE BACKFILL, LIKELY AS A GARBAGE/DUMPED LAYER.

Refer to context [051719]

## 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>A 2</b>     | Context number<br><b>[051722]</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>[051722]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |  |
|--|--|-----------------|--|--|-----------------|--|
|  |  | <b>(051723)</b> |  |  | Same as context |  |
|  |  | <b>[051722]</b> |  |  | Cuts context    |  |
|  |  | <b>(051352)</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 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 type="checkbox"/><br>ring-ditch <input checked="" 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 checked="" type="checkbox"/> NE-SW<br>✓ <input type="checkbox"/> NW-SE<br>N                                                                                                                          | <b>Sides</b><br>L <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>Z <input type="checkbox"/> undercutting<br>[ ] <input type="checkbox"/> complex* | <b>Base</b><br>- <input type="checkbox"/> flat<br>C <input checked="" 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><br><b>113 m</b>                                                                                                                                                                                                                                                                                    | <b>Width</b><br><b>0.84 m</b>                                                                                                                                                                                                                              | <b>Depth</b><br><b>0.46 m</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"/><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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <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

|            |           |                         |                                                                                                           |
|------------|-----------|-------------------------|-----------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos               | Drawing nos                                                                                               |
|            |           | <b>0501431-36</b>       | <b>SH0924</b>                                                                                             |
|            |           | Surveyed: <b>+ 17</b>   | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|            |           | <b>DFF 05360+ 05349</b> |                                                                                                           |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>25/9/17</b>                                                                                           |
| Initials <b>P.D.C.</b>                                                                                        |
| Checked by <b>HN</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 2 was excavated a curvilinear, with u-shaped base, ditch with a depth of 0.45m, a width of 0.34m and a length excavated of 1.13m. Running on a NE to SW axis. The sides have a steep sloping.

This ditch it seems to be connected with possible a ring ditch.

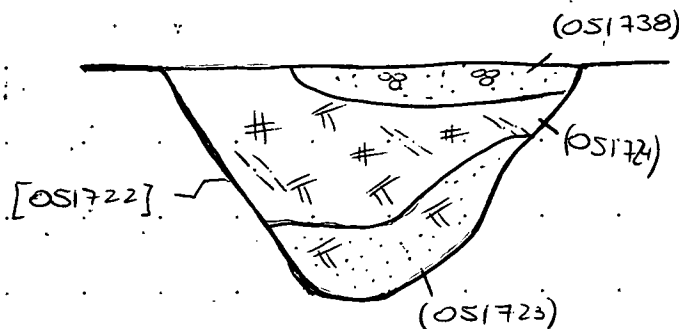
In The Face oriented to the E (D# 05349) is possible to see the truncation of this ditch by [051369].

Refer to context | 051723

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

## SKETCHES

N.T.S. SW Fac. section of Ring Ditch



| key |          |
|-----|----------|
| ⊗   | Gravel   |
| •   | SAND     |
| #   | CHARCOAL |
|     | clay     |
|     | silt     |

General Matrix

(051351)

(051738)

(051724)

(051723)

[051722]

(051352)

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/trench | Context number                                                                                         |
| A 14      | TEA 5      | A 2             | (051723)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [051722]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |  |
|--|--|----------|--|--|-----------------|--|
|  |  | (051724) |  |  | Same as context |  |
|  |  | (051723) |  |  | Cuts context    |  |
|  |  | [051722] |  |  | Cut by context  |  |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                           |       |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Shape                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                           |       |          | <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> |
| 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                                                                                                                                                                                                                                                      |       |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <p>I <input type="checkbox"/> N-S</p> <p>H <input type="checkbox"/> E-W</p> <p>↘ <input type="checkbox"/> NE-SW</p> <p>↙ <input type="checkbox"/> NW-SE</p> <p>N<br/>▲</p>                                                                                                   | <p>└ <input type="checkbox"/> vertical</p> <p>┘ <input type="checkbox"/> steep</p> <p>↘ <input type="checkbox"/> moderate sloping</p> <p>↙ <input type="checkbox"/> gentle</p> <p>⋈ <input type="checkbox"/> stepped</p> <p>└ <input type="checkbox"/> undercutting</p> <p>⋈ <input type="checkbox"/> complex*</p> | <p>— <input type="checkbox"/> flat</p> <p>⌒ <input type="checkbox"/> concave</p> <p>∪ <input type="checkbox"/> v-shaped</p> <p>↘ <input type="checkbox"/> sloping</p> <p>⋈ <input type="checkbox"/> uneven</p> <p>⋈ <input type="checkbox"/> complex*</p> |       |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| 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"/>                                                                       |                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                           |       |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

### FILL/DEPOSIT

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

### DESCRIPTION

### INTERPRETATION

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

### CROSS REFERENCE

### Basic process

construction ☐ use ☐ addition ☒

Date ☐ 25/9/17

Initials ☐ R.D.C.

Checked by ☐ MH

|             |            |                                                                                                           |             |
|-------------|------------|-----------------------------------------------------------------------------------------------------------|-------------|
| Sample nos. | Finds nos. | Photo nos.                                                                                                | Drawing no. |
|             |            | 0501431-736                                                                                               | SM 24       |
|             |            | Surveyed: +17                                                                                             |             |
|             |            | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |             |
|             |            | 05360 + 05849                                                                                             |             |

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)

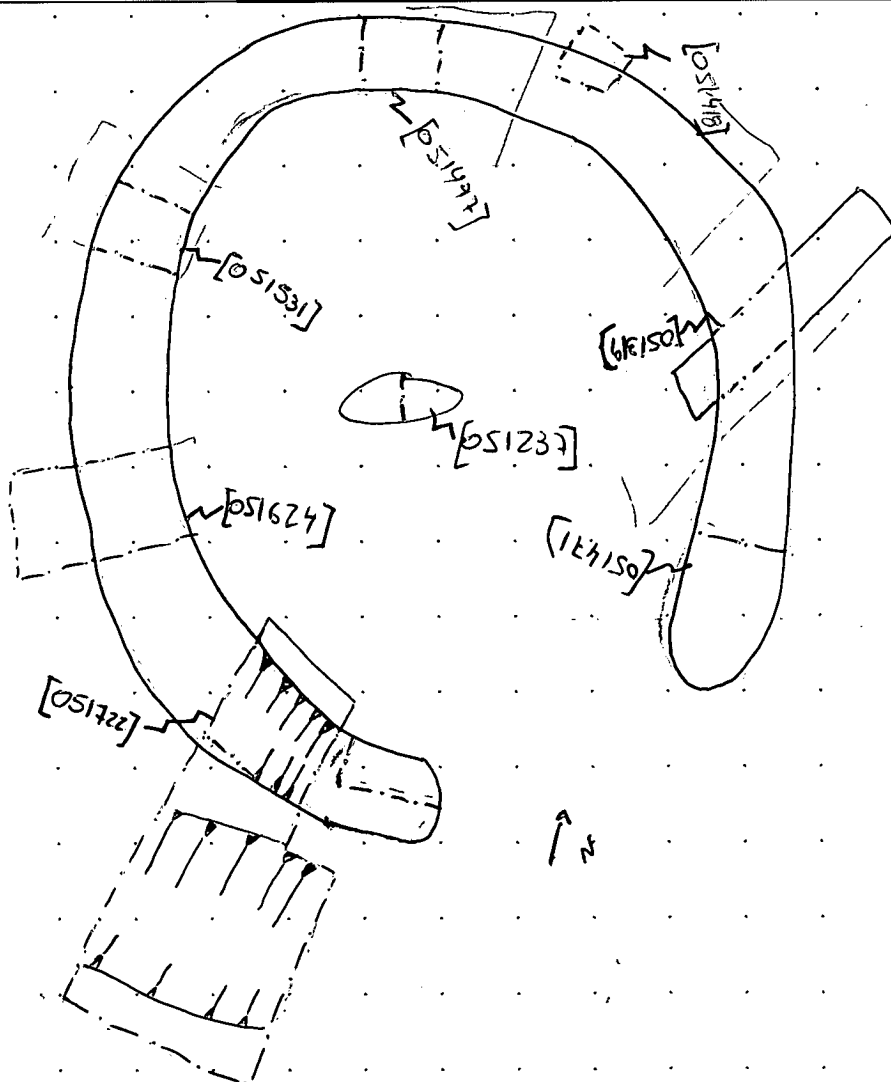
Moderately compact layer with a mid brownish-orange colour and a sand-clay composition. The maximum thickness is 0.15 m.  
It seems to be a natural infilling due to a collapse of the edge.

Refer to context

051722

## 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>A.2</b>     | Context number<br><b>(051724)</b>                                                                                      |
| ECB #                   | Subgroup                  | Parent context<br><b>[051722]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(051738)</b> |  |  | Same as context |
|  |  | <b>(051724)</b> |  |  | Cuts context    |
|  |  | <b>(051723)</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><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><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"/><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 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>0.33 m Max                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <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 ☒

|                                                                                                                                           |           |              |                 |
|-------------------------------------------------------------------------------------------------------------------------------------------|-----------|--------------|-----------------|
| Sample nos                                                                                                                                | Finds nos | Photo nos    | Drawing nos     |
|                                                                                                                                           |           | 0501431 → 36 | <b>SHEET 17</b> |
| Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D# 05360</b> |           |              |                 |

|            |         |
|------------|---------|
| Date       | 25/4/17 |
| Initials   | R.D.C.  |
| Checked by | HN      |

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 layer with a mid brownish-grey colour and a silt-clay composition. The maximum thickness is 0.33 m with a ~~few~~ occasional chalk inclusions, animal bones, charcoal and burned pottery. Due to the size of the pot, it is not possible to confirm that the origin is from early middle iron age like most of the biggest pieces on area 2, but probably does due to the high quantity of this pot. on the area.

The thickness of the layer, arriving to the top of the cut, and the composition, seems to show us a deliberate backfill.

Refer to context

051722  
051723

## 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: P2</b>   | Context number<br><b>(051725)</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context<br><b>[051727]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(051351)</b> |  |  | Same as context |
|  |  | <b>(051725)</b> |  |  | Cuts context    |
|  |  | <b>(051726)</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 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 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"/>                                                                       |                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                    |       |          |

- ☐ 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                                                                                                                                                       |                          | 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 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"/> <input checked="" type="checkbox"/> clay<br>silty <input type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input checked="" type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat |                                     |
| 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                                                                                                                                                        | <b>M</b>                 | <b>M</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |                                                                                                                                                                                                                                                      | <b>M</b>                            |
| bulk find                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                             | <input checked="" 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><b>S05246</b> | Finds nos<br> | Photo nos<br>from <b>0501331</b><br>to <b>0501423</b><br>Photogram.<br><b>0501526</b><br><b>0501527</b><br><b>0501528</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D05388 80</b> |
|-----------------------------|---------------|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>27/04/17</b>                                                                                          |
| Initials <b>RSQ</b>                                                                                           |
| Checked by <b>MH</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)

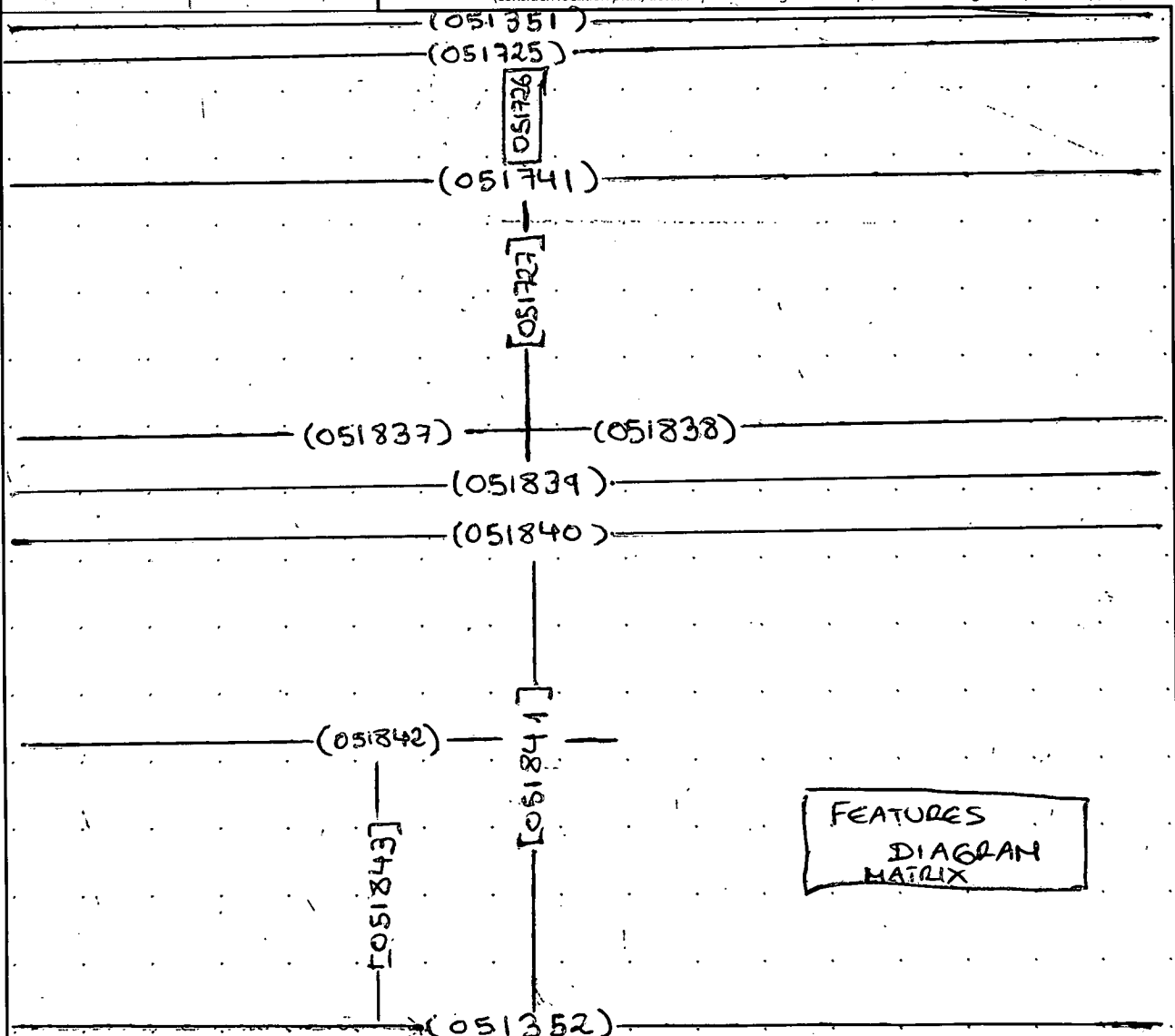
Fill (051725) of Ditch "Terminus" [051727], which has been interpreted as a deliberate backfill due to the fact that was formed quickly consequence of the abandonment (probably a ritual action) of the terminus, in fact a terminus of a ring ditch (house). Also, this fill covers a packing-stones (051726), which should have been disassembled before leaving the house and finally the terminus would have been filled throwing several waste (such as pott fragments, bones...) and soil, and probably also some fired activities would have been carried out to "close down" the construction. That would explain why a lot of evidences of charcoal, fire, small pieces of cooked clay, etc., have been found in such fill.

Regarding the inclusions, the potts found could be dated in some moment of the Middle Iron Age, therefore that record agrees with documented record around such place.

Refer to context

## 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>P2</b>      | Context number<br><b>(051726)</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context<br><b>[051727]</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(051725)</b> |  |  | Same as context |
|  |  | <b>(051726)</b> |  |  | Cuts context    |
|  |  | <b>(051741)</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>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>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 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 <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 checked="" 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 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> <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>bulk find</b> <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |                                                          |                                                                                                                                                 |
|------------|-----------|----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos<br>Set of Photo-gramm. from 0501381 to 0501423 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>005380 |
|------------|-----------|----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

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

|            |          |
|------------|----------|
| Date       | 27/09/17 |
| Initials   | DSR      |
| Checked by | HH       |

# ADDITIONAL INFORMATION

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

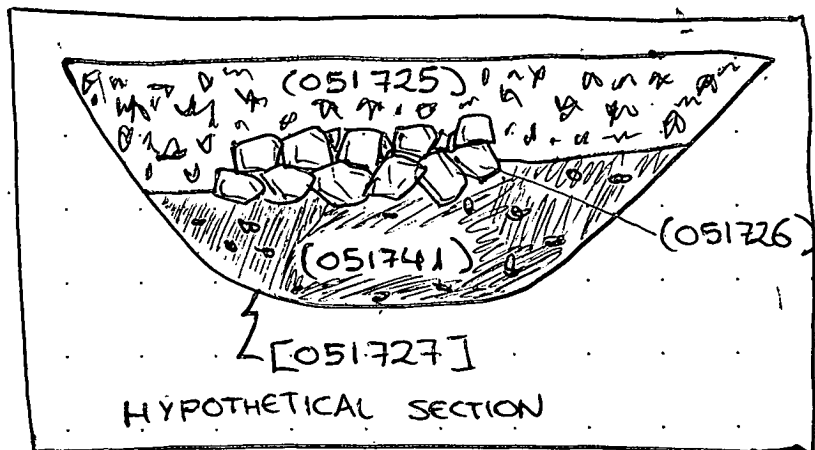
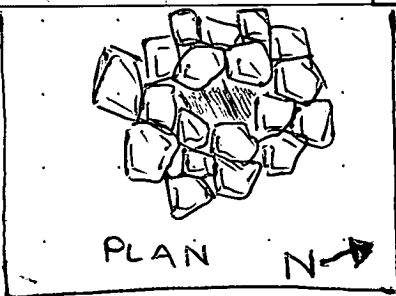
Packing Stones (051726), documented principally by Photogrammetry, which presents circular shape and, at least, two and a half stone strings. Regarding the stones, we've found small and medium size stone, highlighting that some of them have fired evidences, probably, due to the fact that after disassembling some fire activities were carried out in such place in order to abandon the area.

Although any piece of pottery has been documented in this context, we can date its construction and use in the Middle Iron Age as pottery from that chronology have been found either the abandonment layer (051725) and the foundation layer (051741).

Refer to context

## SKETCHES

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



## STRATIGRAPHY

|  |  |          |          |  |                 |                                  |
|--|--|----------|----------|--|-----------------|----------------------------------|
|  |  | (051741) |          |  | Same as context | (051837)<br>(051838)<br>(051839) |
|  |  | (051727) |          |  | Cuts context    |                                  |
|  |  | (051837) | (051838) |  | 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 checked="" type="checkbox"/> curvilinear <input checked="" type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                       |                                                                                                                                                                                                                                                                                                                   |                      |                         |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>II <input checked="" 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 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*<br>sloping |                      |                         |
|                                                                                                                                                                                                                                                                                                                    |                       | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input checked="" 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><br><br> | <b>Width</b><br>0.68                                                                                                                                                                                                                                                                                              | <b>Depth</b><br>0.25 | <b>Diameter</b><br><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"/>                                                  |                       |                                                                                                                                                                                                                                                                                                                   |                      |                         |

☐ 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)

**TERMINUS OF RING-DITCH**

## INTERPRETATION

| <i>Compaction</i>                                                                                                                                       |                          | <i>Colour</i>                                                                                                              |                          |                          |                          |                          |                          | <i>Composition</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"/> brown <input type="checkbox"/>                                                           |                          |                          |                          |                          |                          | silty <input type="checkbox"/>    |                          | <input type="checkbox"/> silt   |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                                                                                                          |                          | greyish <input type="checkbox"/> grey <input type="checkbox"/>                                                             |                          |                          |                          |                          |                          | sandy <input type="checkbox"/>    |                          | <input type="checkbox"/> sand   |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> friable                                                                                                                        |                          | orangeish <input type="checkbox"/> orange <input type="checkbox"/>                                                         |                          |                          |                          |                          |                          | gravelly <input type="checkbox"/> |                          | <input type="checkbox"/> gravel |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                                                                                                         |                          | yellowish <input type="checkbox"/> yellow <input type="checkbox"/>                                                         |                          |                          |                          |                          |                          | peaty <input type="checkbox"/>    |                          | <input type="checkbox"/> peat   |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                                                                                                         |                          | reddish <input type="checkbox"/> red <input type="checkbox"/>                                                              |                          |                          |                          |                          |                          |                                   |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                                                                                                         |                          | blueish <input type="checkbox"/> blue <input type="checkbox"/>                                                             |                          |                          |                          |                          |                          |                                   |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <i>Thickness</i>                                                                                                                                        |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                              |                          |                          |                          |                          |                          | other* <input type="checkbox"/>   |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <i>Inclusions</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"/> |
| <div style="float: right; width: 100px;">                     other fill/deposit (describe below) <input type="text"/><br/> <input type="text"/> </div> |                          |                                                                                                                            |                          |                          |                          |                          |                          |                                   |                          |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |

### Basic process

|            |           |                                          |                                                                                                                                        |                                                                                                               |
|------------|-----------|------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                | Drawing nos                                                                                                                            | construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
|            |           | 0501525<br>0501526<br>0501527<br>0501528 | Surveyed: 05361<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05380 | Date 27/02/17<br>Initials ASQ<br>Checked by HH                                                                |

Cut of Terminus [051727] of a Round-House, where as we mentioned in other context sheets (see (051725)(051726)(051741)), a packing-stones has been documented defining the second moment of such construction. Basically such terminus is connected with other stretches where the same ditch has been found although due to several post-depositional processes, such as erosion, unfortunately we haven't been able to document the 100% of the ring.

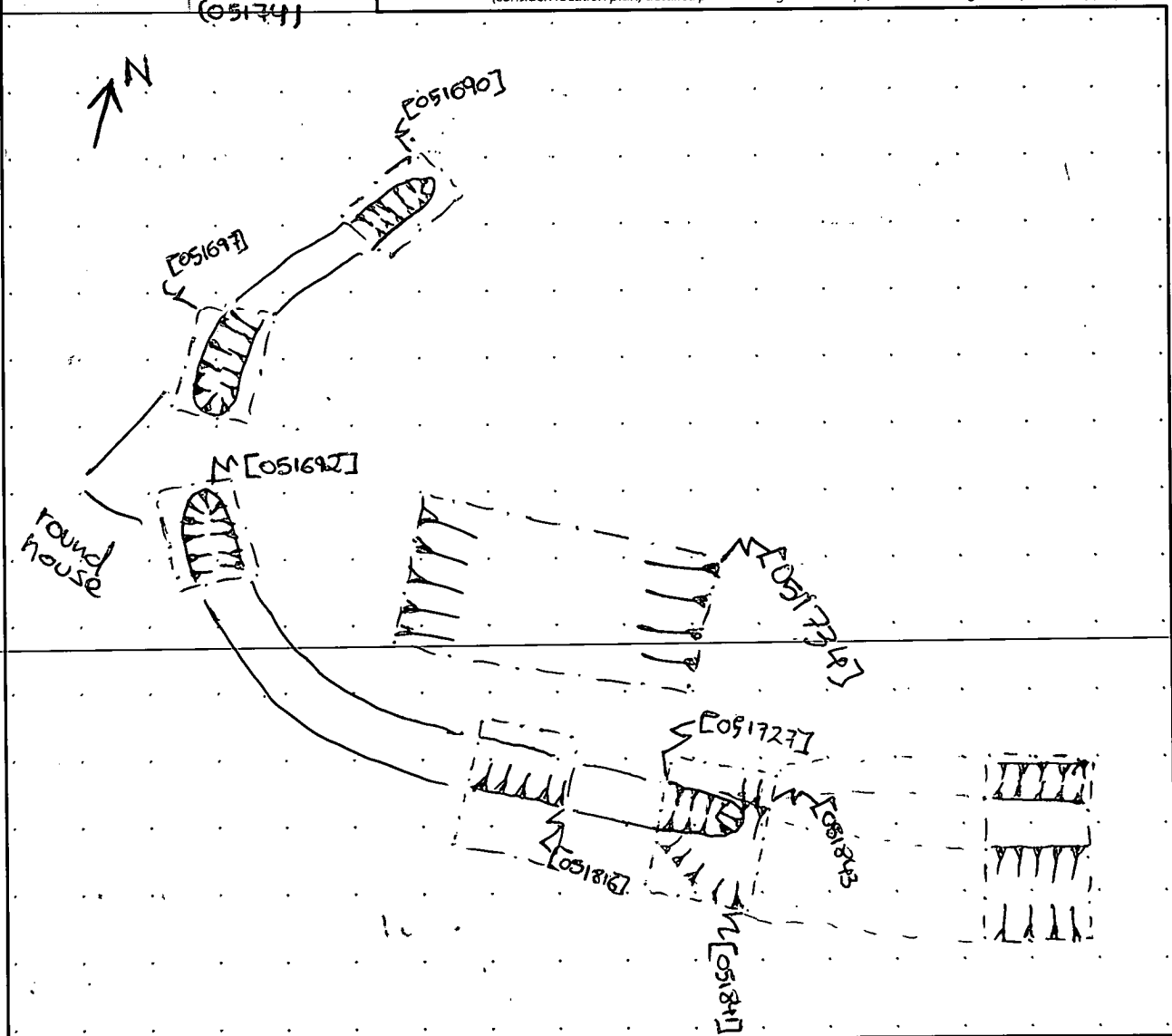
On the other hand, as we can see in the stratigraphical sequence, this terminus defines the last construction episode known, as it's cutting to another earlier ditch. Thus, we think that the sequence could confirm our historical interpretation and argue that such archaeologed remains were the result of a classic household social organization.

Refer to context

(051725)  
(051726)  
(051741)

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>TEA5</b> | Sub-area/Trench<br><b>2</b>       | Context number<br><b>(051728)</b>                                                                                      |
| ECB #                   | Subgroup                  | Parent context<br><b>[051734]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(05135)</b>  |  |  | Same as context |
|  |  | <b>(051728)</b> |  |  | Cuts context    |
|  |  | <b>(051729)</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>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>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"/>                                       |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## 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"/> 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 checked="" 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 checked="" 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 checked="" 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>1.3m</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<br>frequency <b>M</b><br>bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

## CROSS REFERENCE

|                        |                       |                                                                                          |                                                                                                                                                                                  |
|------------------------|-----------------------|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>—</b> | Finds nos<br><b>—</b> | Photo nos<br><b>102-663/669</b><br><b>0501319</b><br><b>0501320</b><br><b>0501360-61</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>sheet 42</b><br><b>005374 005375</b> |
|------------------------|-----------------------|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☐ disuse ☒

Date **26/9/17**

Initials **HSE**

Checked by **HM**

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

0501445-

0501448

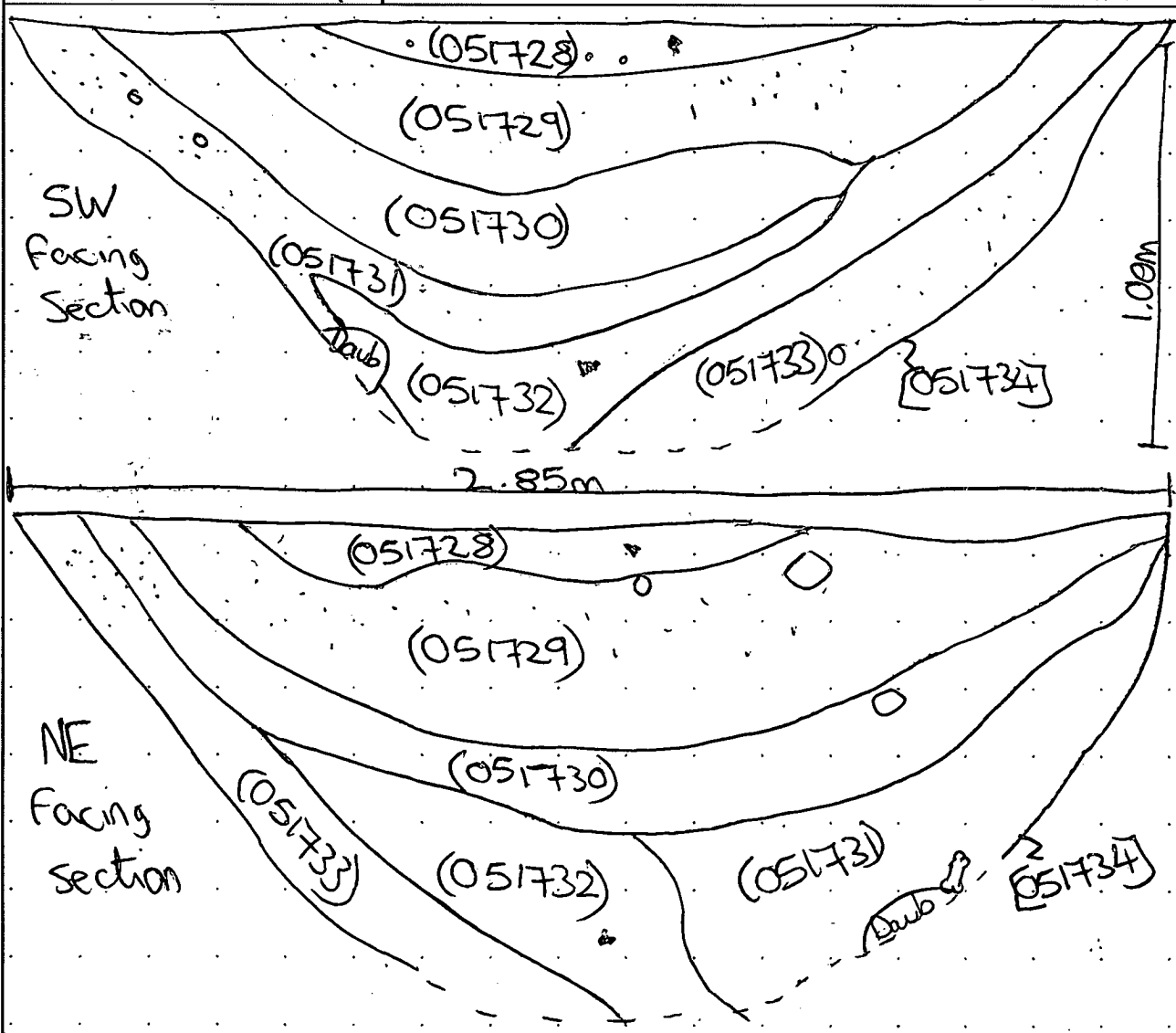
# ADDITIONAL INFORMATION

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

- fill of [051734]
- fill can be seen in both SW & NE facing sections
- moderately compact mid brownish grey, gravelly grey fill
- moderate amount of stones - 2-4cm
- occasional amount of charcoal
- no finds
- all fills in this feature are a result of deliberate backfill

Refer to context [051734] for plan

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





## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (051728) |  |  | Same as context |
|  |  | (051729) |  |  | Cuts context    |
|  |  | (051730) |  |  | 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 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><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 checked="" 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                                  | <input type="checkbox"/> light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> | <input type="checkbox"/> clayey <input type="checkbox"/> clay | <input type="checkbox"/> silty <input checked="" type="checkbox"/> silt | <input type="checkbox"/> sandy <input type="checkbox"/> sand | <input checked="" type="checkbox"/> gravelly <input checked="" type="checkbox"/> gravel |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| <input checked="" type="checkbox"/> moderately compact            | <input type="checkbox"/> brownish <input checked="" type="checkbox"/> brown                                                                                    | <input type="checkbox"/> peaty <input type="checkbox"/> peat  | <input type="checkbox"/> silty <input type="checkbox"/> silt            | <input type="checkbox"/> sandy <input type="checkbox"/> sand | <input type="checkbox"/> gravelly <input type="checkbox"/> gravel                       |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> greyish <input type="checkbox"/> grey                                                                                                 | <input type="checkbox"/> peaty <input type="checkbox"/> peat  | <input type="checkbox"/> silty <input type="checkbox"/> silt            | <input type="checkbox"/> sandy <input type="checkbox"/> sand | <input type="checkbox"/> gravelly <input type="checkbox"/> gravel                       |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| <input type="checkbox"/> friable                                  | <input type="checkbox"/> orangeish <input checked="" type="checkbox"/> orange                                                                                  | <input type="checkbox"/> peaty <input type="checkbox"/> peat  | <input type="checkbox"/> silty <input type="checkbox"/> silt            | <input type="checkbox"/> sandy <input type="checkbox"/> sand | <input type="checkbox"/> gravelly <input type="checkbox"/> gravel                       |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
|                                                                   | <input type="checkbox"/> yellowish <input type="checkbox"/> yellow                                                                                             | <input type="checkbox"/> peaty <input type="checkbox"/> peat  | <input type="checkbox"/> silty <input type="checkbox"/> silt            | <input type="checkbox"/> sandy <input type="checkbox"/> sand | <input type="checkbox"/> gravelly <input type="checkbox"/> gravel                       |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
|                                                                   | <input type="checkbox"/> reddish <input type="checkbox"/> red                                                                                                  | <input type="checkbox"/> peaty <input type="checkbox"/> peat  | <input type="checkbox"/> silty <input type="checkbox"/> silt            | <input type="checkbox"/> sandy <input type="checkbox"/> sand | <input type="checkbox"/> gravelly <input type="checkbox"/> gravel                       |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
|                                                                   | <input type="checkbox"/> blueish <input type="checkbox"/> blue                                                                                                 | <input type="checkbox"/> peaty <input type="checkbox"/> peat  | <input type="checkbox"/> silty <input type="checkbox"/> silt            | <input type="checkbox"/> sandy <input type="checkbox"/> sand | <input type="checkbox"/> gravelly <input type="checkbox"/> gravel                       |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| Thickness                                                         | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                  | other* <input type="checkbox"/>                               |                                                                         |                                                              |                                                                                         |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| 0.52m                                                             |                                                                                                                                                                |                                                               |                                                                         |                                                              |                                                                                         |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| 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                                   | 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 type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### CROSS REFERENCE

### Basic process

| Sample nos | Findings nos | Photo nos                                       | Drawing nos                                                                                                                                         | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
|------------|--------------|-------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| —          | 52051        | 0501319-320<br>0501300-61<br>0501445<br>0501448 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>sheet 42<br>D05374 D05375 | Date 26/9/17<br>Initials HSE<br>Checked by HH                                                                 |

# ADDITIONAL INFORMATION

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

- fill of ditch [051734]
- fill can be seen in both sections
- moderately compact mid brownish orange, silty gravel fill
- moderate amount of bone + pot
- clearly see this fill is a result of deliberate backfill, lots of darker inclusions
- 1 lithic small find 52051

Refer to context

SKETCHES

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

(051728) for sketch

[051734] for plan



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA5</b> | Sub-area/Trench<br><b>2</b>       | Context number<br><b>(051730)</b>                                                                                      |
| ECB #                   | Subgroup -                | Parent context<br><b>(051734)</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(051729)</b> |  |  | Same as context |
|  |  | <b>(051730)</b> |  |  | Cuts context    |
|  |  | <b>(051731)</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"/> |  |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   | <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 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 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) |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| <b>Thickness</b><br><b>0.20m</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"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## CROSS REFERENCE

|                        |                           |                                                                                           |                                                                                                                                                                                  |
|------------------------|---------------------------|-------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>-</b> | Finds nos<br><b>52025</b> | Photo nos<br><b>0501319-320</b><br><b>0501366-61</b><br><b>0501445-</b><br><b>0501448</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>sheet 42</b><br><b>005374 005375</b> |
|------------------------|---------------------------|-------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☐ disuse ☒

|            |                |
|------------|----------------|
| Date       | <b>26/9/17</b> |
| Initials   | <b>HSE</b>     |
| Checked by | <b>HM</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 of ditch [051734]
- Fill can be seen in both sections
- moderately compact, mid grey, clayey silt fill
- occasional amount of stones 2-3 cm
- no finds
- this fill is a result of deliberate backfill
- 1 lithic small find 52025

Refer to context

SKETCHES

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

(051728) for Sketch

[051734] for plan

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (051730) |  |  | Same as context |
|  |  | (051731) |  |  | Cuts context    |
|  |  | (051732) |  |  | 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

| <i>Compaction</i>                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <i>Colour</i>                                                                                                                                                                                                                                                                                                                                                       | <i>Composition</i>       |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|
| <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 type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input checked="" type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>bluish <input type="checkbox"/> blue <input type="checkbox"/> | clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input checked="" type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input checked="" type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| <i>Thickness</i><br><b>0.30m</b>                                                                                                                                 | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| <i>Inclusions</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                                                                                                                                                        | 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 type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | other fill/deposit (describe below) _____                                                                                                                                                                                                                                                                                                                           |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |

### Basic process

|                                     |                                        |                                                               |                                                                                                                                                                    |                                                                                                                                                                   |
|-------------------------------------|----------------------------------------|---------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><del>52010</del><br>— | Finds nos<br><del>52010</del><br>52010 | Photo nos<br>0501319-320<br>0501360-61<br>0501445-<br>0501448 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>sheet 42<br>D05374 D05375 | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/><br>Date: 26/9/17<br>Initials: HSE<br>Checked by: MM |
|-------------------------------------|----------------------------------------|---------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

- Refer to context

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

[051734] for plan

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEAS</b> | Sub-area/Trench<br><b>2</b>       | Context number<br><b>(051732)</b>                                                                                      |
| ECB #                   | Subgroup                  | Parent context<br><b>(051734)</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(051731)</b> |  |  | Same as context |
|  |  | <b>(051732)</b> |  |  | Cuts context    |
|  |  | <b>(051733)</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"/> |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               | <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"/> paleochannel<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>— <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"/>                                       |  |                                                                                                                                                                                                                                                                                             |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                 |
| <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 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 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) |                          |                          |                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                                     |                          |                          |
| <b>Thickness</b><br><b>0.28m</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                                                                                                                                                                             | 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 checked="" 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>05241</b><br><b>05250</b> | Finds nos<br><b>52024</b><br><b>52022</b> | Photo nos<br><b>0501319-320</b><br><b>0501360-61</b><br><b>0501445</b><br><b>0501448</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>sheet 42</b><br><b>D05374 D05375</b> |
|--------------------------------------------|-------------------------------------------|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☐ use ☐ disuse ☒

|            |                |
|------------|----------------|
| Date       | <b>26/9/17</b> |
| Initials   | <b>HSE</b>     |
| Checked by | <b>MM</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 of ditch
- Fill can be seen in both sections
- moderately compact dark silty clay fill
- Sample collected 0524 + 05250
- Occasional amount of charcoal / fired clay
- moderate amount of bone charcoal
- this fill is a result of deliberate backfill
- 2 small finds - debitage 52022
- fire plate 52024

Refer to context

SKETCHES

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

(051728) for sketch

[051734] for plan



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEAS</b> | Sub-area/Trench<br><b>2</b>       | Context number<br><b>(051733)</b>                                                                                      |
| ECB #                   | Subgroup                  | Parent context<br><b>(051734)</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(051732)</b> |  |  | Same as context |
|  |  | <b>(051733)</b> |  |  | Cuts context    |
|  |  | <b>(051734)</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>I <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<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"/>                                       |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### 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 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 type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" 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 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 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <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><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td><input type="radio"/></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 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="radio"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="radio"/>                                                                                                                                                                                                                                                                                                                                                          | <input type="radio"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="radio"/>    | <input type="radio"/>    | <input type="radio"/>    | <input type="radio"/>    | <input type="radio"/>    | <input type="radio"/>    | <input type="radio"/>    | <input type="radio"/>    | <input type="radio"/>    | <input type="radio"/>    | <input type="radio"/>    | <input type="radio"/>    | <input type="radio"/>    | <input type="radio"/>    | <input type="radio"/>    |              |                  |         |              |           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 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

|                        |                       |                                                                                           |                                                                                                                                                                                  |
|------------------------|-----------------------|-------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>—</b> | Finds nos<br><b>—</b> | Photo nos<br><b>0501319-320</b><br><b>0501360-61</b><br><b>0501445-</b><br><b>0501448</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>sheet 42</b><br><b>D05374 D05375</b> |
|------------------------|-----------------------|-------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

|                         |
|-------------------------|
| Date<br><b>26/1/17</b>  |
| Initials<br><b>HSE</b>  |
| Checked by<br><b>HH</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 of ditch [05/734]
- fill can be seen in both sections
- moderately compact mid orangeish brown, gravelly silt fill
- occasional amount of stones 5-7 cm
- occasional amount of charcoal
- fill is result of deliberate backfill

Refer to context

SKETCHES

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

(05/728) for sketch

[05/734] for plan



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                            |                             |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field:<br><b>TEAS</b> | Sub-area/Trench<br><b>2</b> | Context number<br><b>051734</b>                                                                                        |
| ECB #                   | Subgroup                   | Parent context<br><b>-</b>  | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(051733)</b> |  |  | Same as context |
|  |  | <b>051734</b>   |  |  | Cuts context    |
|  |  | <b>051752</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 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 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 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>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 checked="" 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>U <input checked="" type="checkbox"/> complex* |                             |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br><b>2.85</b>                                                                                                                                                                                                                                                                                   | <b>Width</b><br><b>1.00</b>                                                                                                                                                                                                                              | <b>Depth</b><br><b>1.00</b> | <b>Diameter</b><br><b>-</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input checked="" 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"/> | 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                                                                                     | <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

|                                                   |                                                                                                  |                                                                                                                              |                                                                                                                                                                                                |
|---------------------------------------------------|--------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Sample nos</b><br><b>05241</b><br><b>05250</b> | <b>Finds nos</b><br><b>52010</b><br><b>52022</b><br><b>52024</b><br><b>52025</b><br><b>52051</b> | <b>Photo nos</b><br><b>0501319</b><br><b>0501320</b><br><b>0501360</b><br><b>0501361</b><br><b>0501445</b><br><b>0501448</b> | <b>Drawing nos</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>sheet 42</b><br><b>005374</b> <b>005375</b> |
|---------------------------------------------------|--------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

|                                                                                         |
|-----------------------------------------------------------------------------------------|
| <b>Date</b> <b>26/9/17</b><br><b>Initials</b> <b>HSE</b><br><b>Checked by</b> <b>MM</b> |
|-----------------------------------------------------------------------------------------|

THIS FORM IS INCOMPLETE IF FIELDS MARKED WITH \* ARE EMPTY. PTO for additional information (and describing all items marked with \*) and sketches

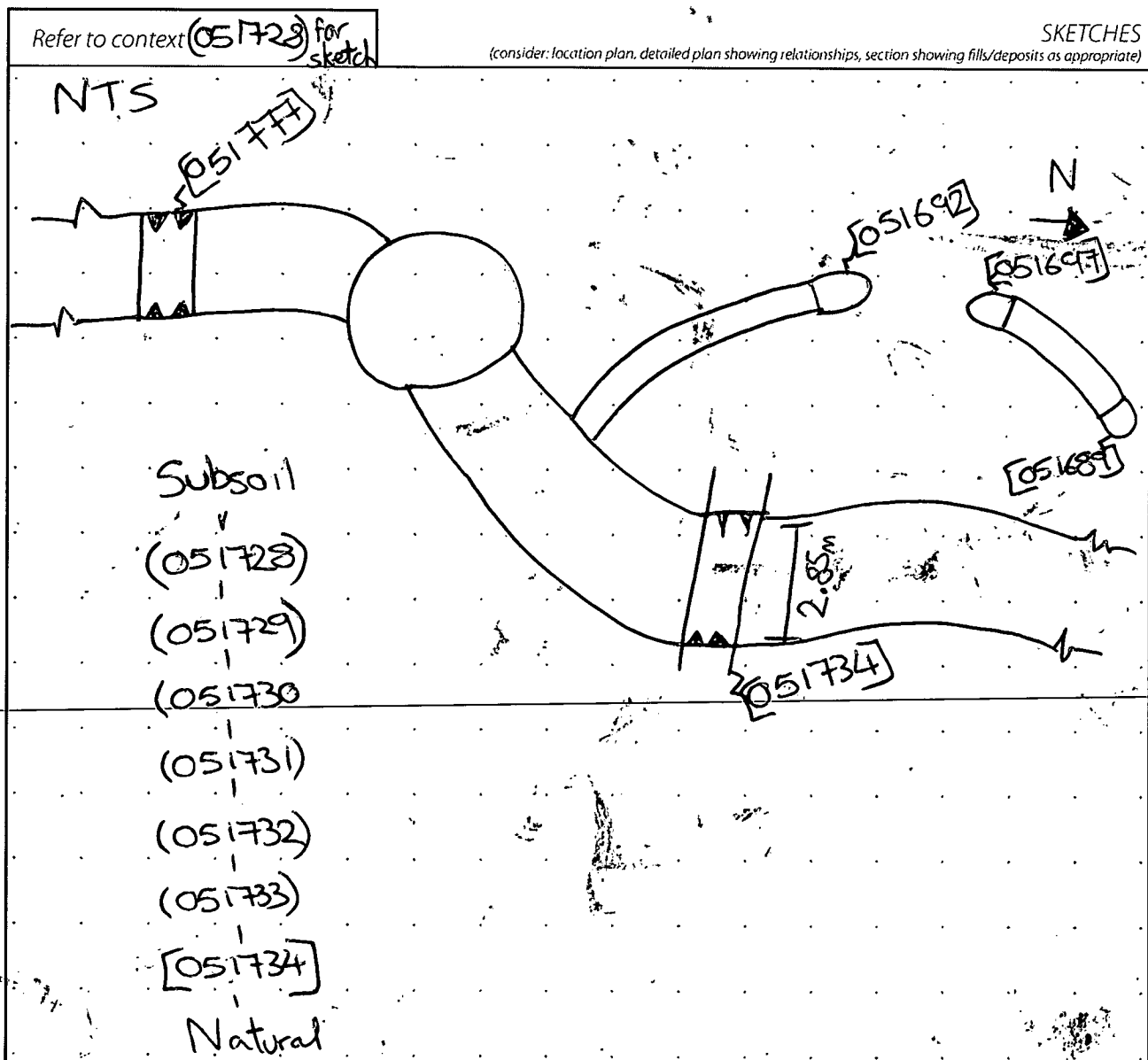
# ADDITIONAL INFORMATION

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

- cut of ditch w/ 6 fills (051728)(051729)(051730)(051731)(051732)(051733)
- Eastern side is steep, West side is stepped for safety reasons
- base is unknown, dug to 1m then stopped, bone/pot still being found at this depth
- dog legged iron aged ditch
- in plan, can clearly see a circular enclosure and pit are cutting this ditch
- [051777] is a ditch slot approx 15m S, had identical fills
- Both sections were drawn, even though fills are the same, the thickness changes
- D05374 - SW facing section
- D05375 - NE facing section
- 60cm sun darge in SW section in order to recover the rest of small find 52024

Refer to context (051728) for sketch

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                                                                                         |
| A 14      | TEA 05     | AREA 2          | (051735)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
| —         | —          | [051737]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (051351) |  |  | Same as context | — |
|  |  | (051735) |  |  | Cuts context    | — |
|  |  | (051805) |  |  | Cut by context  | — |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                    |                                    |                                                     |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------------------|--|
| Shape                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                    | pit <input type="checkbox"/>       |                                                     |  |
| 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"/> |  |                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                    | post-hole <input type="checkbox"/> |                                                     |  |
| Orientation                                                                                                                                                                                                                                                                  |  | Sides                                                                                                                                                                                                                                                                |  | Base                                                                                                                                                                                                               |                                    | stake-hole <input type="checkbox"/>                 |  |
| <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 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* |                                    | ditch <input type="checkbox"/>                      |  |
| <input type="checkbox"/> N<br>                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                    |                                    | ring-ditch <input type="checkbox"/>                 |  |
| Dimensions                                                                                                                                                                                                                                                                   |  | Length                                                                                                                                                                                                                                                               |  | Width                                                                                                                                                                                                              |                                    | beam slot <input type="checkbox"/>                  |  |
| in metres                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                    |                                    | construction cut <input type="checkbox"/>           |  |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                    |                                    | robber cut <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"/>                                                                       |  |                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                    |                                    | 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                                                                                                                                                                                                                                                                                                                                              |  | topsoil <input type="checkbox"/>                             |  |                                                         |  |
| <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 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 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"/> |  | subsoil <input type="checkbox"/>                             |  |                                                         |  |
| Thickness                                                                                                                                                        |  | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                          |  | geological subsoil <input type="checkbox"/>                  |  |                                                         |  |
| 0.60 m                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                          |  | remnant topsoil <input type="checkbox"/>                     |  |                                                         |  |
| Inclusions                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                          |  | surface <input type="checkbox"/>                             |  |                                                         |  |
| 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"/> |  |                                                                                                                                                                                                                                                                                                                                                          |  | occupation layer <input type="checkbox"/>                    |  |                                                         |  |
| frequency                                                                                                                                                        |  | O O M M O O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                          |  | dumped layer <input type="checkbox"/>                        |  |                                                         |  |
| 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 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"/>                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                          |  |                                                              |  | deliberate backfill <input checked="" 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

|            |           |                                              |                                                                                                                                                            |                                                                                                               |
|------------|-----------|----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                    | Drawing nos                                                                                                                                                | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| 5 05235    | —         | 0601437 →<br>0501442<br>0501364 →<br>0501367 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 05 359<br>D 05 373<br>sheep 31 | Date 27/09/17<br>Initials AL<br>Checked by MN                                                                 |

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

0501512 →  
0501516

Upper Fill of ditch [051737]

Soft deliberate backfill

occasional presence (5 in total) of fire cracked stones with marks of fire in the majority of them.

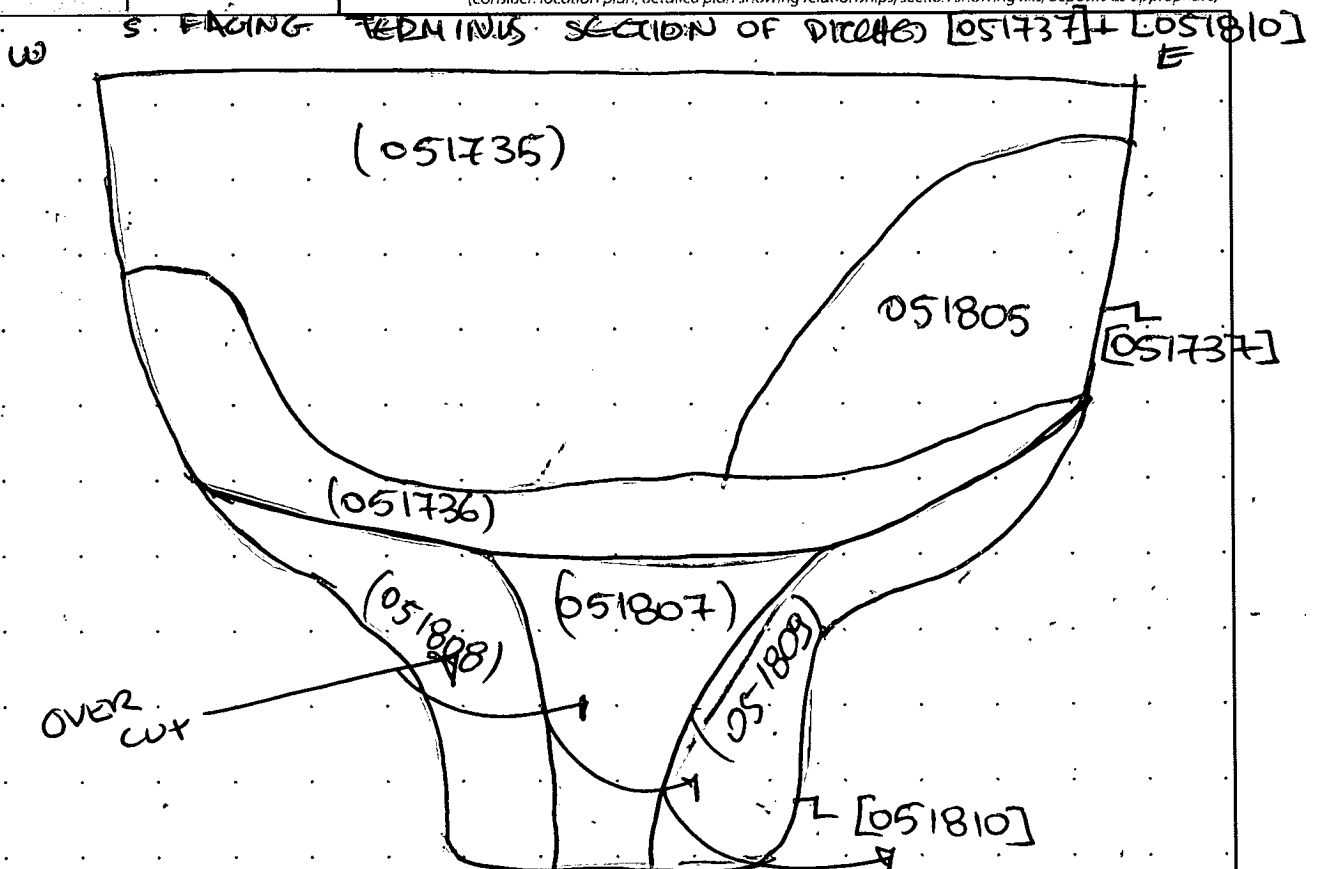
A big stone ( $0,94 \times 0,90 \times 0,12m$ ) was found almost in the middle of the slot in the upper part of the fill (around  $0,20m$  from the surface) found in situ but it hasn't marks of fire or any traces of processing.

The pottery is badly fired and low quality probably of iron age.

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 05     | AREA 2          | (051736)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | (051737)        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |          |  |  |                 |                                     |
|--|----------|--|--|-----------------|-------------------------------------|
|  | (051805) |  |  | Same as context | <input checked="" type="checkbox"/> |
|  | (051736) |  |  | Cuts context    |                                     |
|  | (051737) |  |  | Cut by context  |                                     |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                    |       |                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Shape                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                    |       |                                                                                                                                                                                                                                                           | <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> |  |
| 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                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| <p>I <input type="checkbox"/> N-S</p> <p>H <input type="checkbox"/> E-W</p> <p>↘ <input type="checkbox"/> NE-SW</p> <p>↙ <input type="checkbox"/> NW-SE</p> <p>N <input type="checkbox"/></p>                                                                                |  | <p>┐ <input type="checkbox"/> vertical</p> <p>┌ <input type="checkbox"/> steep</p> <p>└ <input type="checkbox"/> moderate sloping</p> <p>┘ <input type="checkbox"/> gentle</p> <p>┐ <input type="checkbox"/> stepped</p> <p>┌ <input type="checkbox"/> undercutting</p> <p>└ <input type="checkbox"/> complex*</p> |       | <p>— <input type="checkbox"/> flat</p> <p>⌒ <input type="checkbox"/> concave</p> <p>∪ <input type="checkbox"/> v-shaped</p> <p>↘ <input type="checkbox"/> sloping</p> <p>⋈ <input type="checkbox"/> uneven</p> <p>⊞ <input type="checkbox"/> complex*</p> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| 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"/>                                                                       |  |                                                                                                                                                                                                                                                                                                                    |       |                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |

### FILL/DEPOSIT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                     |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Compaction                                                                                                                                                                          |  | Colour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | Composition                                                                                                                                                                                                                                                                                                                                                                                |  | <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 type="checkbox"/></p> <p>dumped layer <input type="checkbox"/></p> <p>deliberate backfill <input checked="" 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> |  |
| <p><input type="checkbox"/> compact</p> <p><input checked="" type="checkbox"/> moderately compact</p> <p><input type="checkbox"/> loose</p> <p><input type="checkbox"/> friable</p> |  | <p>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/></p> <p>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/></p> <p>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/></p> <p>orangeish <input type="checkbox"/> orange <input type="checkbox"/></p> <p>yellowish <input type="checkbox"/> yellow <input type="checkbox"/></p> <p>reddish <input type="checkbox"/> red <input type="checkbox"/></p> <p>blueish <input type="checkbox"/> blue <input type="checkbox"/></p> |  | <p>clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/></p> <p>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/></p> <p>sandy <input type="checkbox"/> sand <input type="checkbox"/></p> <p>gravelly <input checked="" type="checkbox"/> gravel <input type="checkbox"/></p> <p>peaty <input type="checkbox"/> peat <input type="checkbox"/></p> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| Thickness                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| 0.91m                                                                                                                                                                               |  | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| Inclusions                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| <p>use the following:</p> <p>O: occasional</p> <p>M: moderate</p> <p>F: frequent</p>                                                                                                |  | <p>stones*</p> <p>chalk</p> <p>iron pan</p> <p>manganese</p> <p>charcoal</p> <p>plant remains*</p> <p>wood</p> <p>marine shell</p> <p>bone*</p> <p>pot</p> <p>fired clay / CBM</p> <p>CTP</p> <p>mortar/plaster</p> <p>leather/textile</p> <p>glass</p> <p>metal</p> <p>industrial waste</p> <p>lithics</p> <p>coarse stone</p>                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| frequency                                                                                                                                                                           |  | O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | M                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| bulk find                                                                                                                                                                           |  | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                        |  | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |

### 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"/> |
| 5 05236    | —         | 0501437 →<br>0501442<br>0501512 →<br>0501516 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 05369<br>D 05373<br>sheet 31 | Date: 27/09/17<br>Initials: AL<br>Checked by: MH                                                              |

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)

Lower fill of ditch [051737] very close to (051735)  
 but slightly lighter in color and with presence of chalk  
 low quality iron age pottery  
 Two fine cracked stones were found.  
 All the fills of the ditch [051737] were probably  
 created in a short period of time.

Refer to context

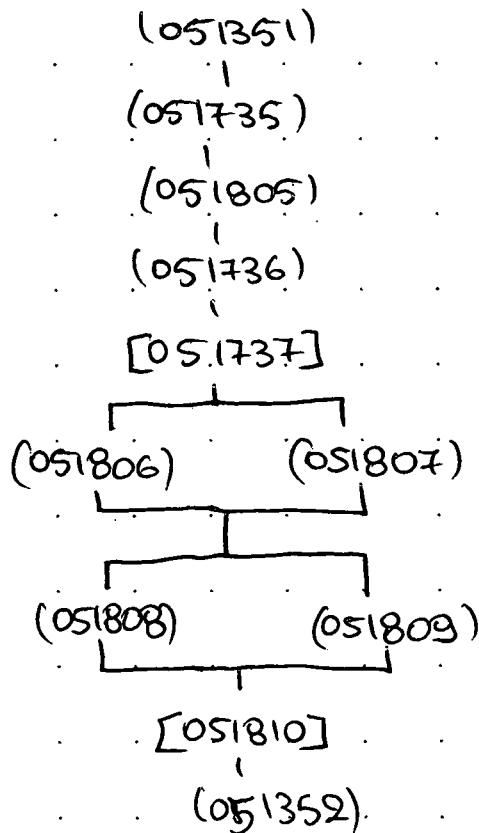
## SKETCHES

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

For section → (051735)

For matrix → (051736)

For plan → [051737]





# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 05</b> | Sub-area/Trench<br><b>AREA 9</b>  | Context number<br><b>[051737]</b>                                                                                      |
| ECB #<br><b>✓</b>       | Subgroup<br><b>✓</b>        | Parent context<br><b>[051737]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |                 |                 |  |  |                                         |
|--|-----------------|-----------------|--|--|-----------------------------------------|
|  |                 | <b>[051736]</b> |  |  | Same as context                         |
|  |                 | <b>[051737]</b> |  |  | Cuts context <b>(051807) + (051806)</b> |
|  | <b>(051806)</b> | <b>(051807)</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 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<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                                                                                                                                                                                                                         |
| in metres                                                                                                                                                                                                                                                                               |  | <b>&lt; 2m</b>                                                                                                                                                                                                                                                                   | <b>1.20m</b> | <b>0.65m</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                        |
| <input type="checkbox"/> post-hole                  |
| <input type="checkbox"/> stake-hole                 |
| <input checked="" 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 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"/><br>other* <input type="checkbox"/> |                  |
| Thickness                                                                                                                                             |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                                       |                  |
|                                                                                                                                                       |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                                       |                  |
| Inclusions                                                                                                                                            |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                                       |                  |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                     | stones* | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | iron ore | 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                             |
| <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) |

### CROSS-REFERENCE

### Basic process

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

|            |                 |
|------------|-----------------|
| Date       | <b>27/09/12</b> |
| Initials   | <b>AL</b>       |
| Checked by | <b>HW</b>       |

|            |           |                  |                                                                                                           |
|------------|-----------|------------------|-----------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos        | Drawing nos                                                                                               |
|            |           | <b>0501437 →</b> | Surveyed:                                                                                                 |
|            |           | <b>0501442</b>   | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|            |           | <b>0501512 →</b> | <b>D 05359</b>                                                                                            |
|            |           | <b>0501516</b>   | <b>D 05373</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)

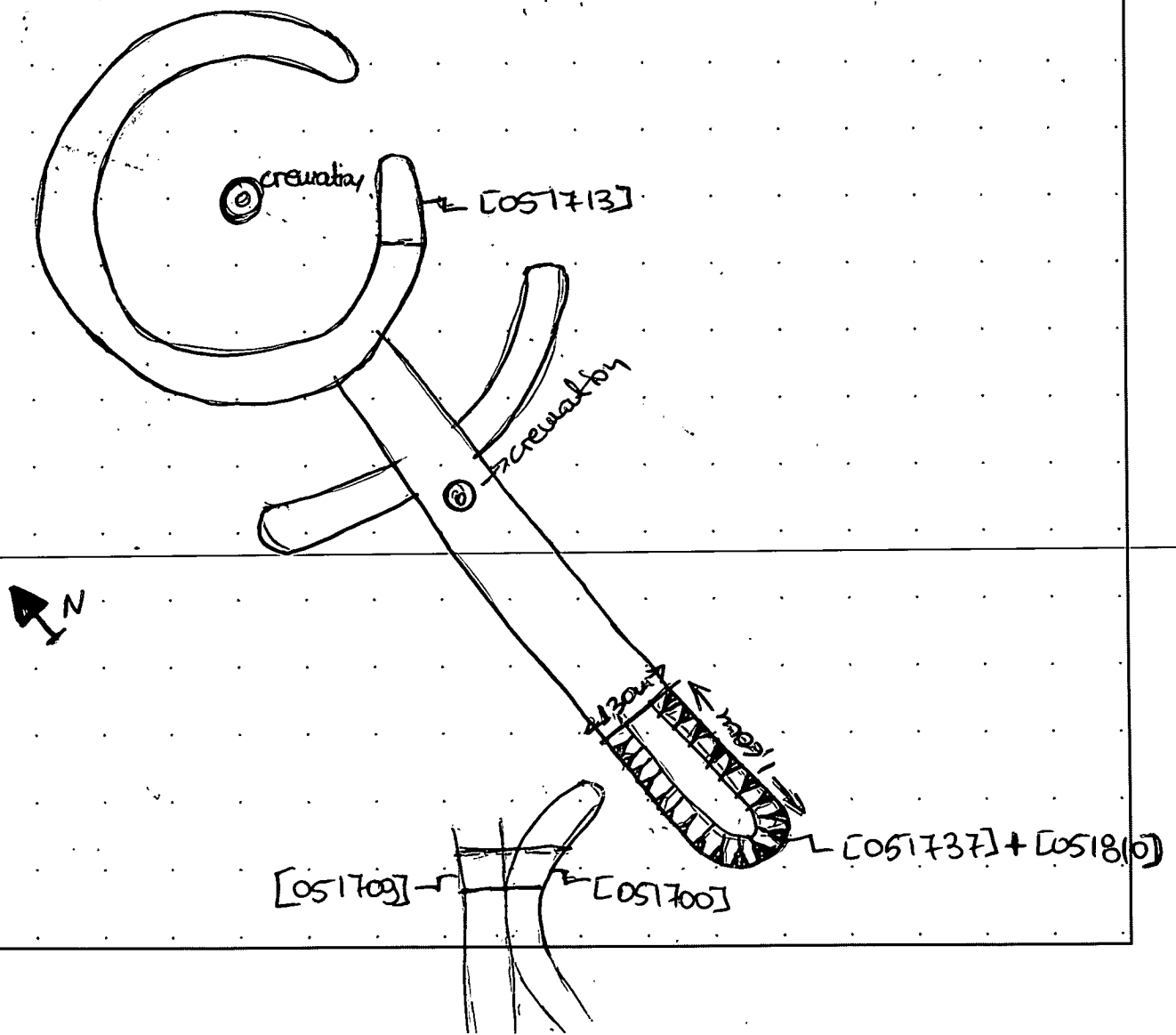
Terminus of a linear ditch aligned N-S. It was cut on top of an older ditch [051810] much deeper. From the indications seems to be a ditch for drainage. All around the terminus there is a thin line (area 008m) where the fill has penetrated into the natural. This probably indicates the level of the unmoving water. Has three fill all formed in a short period of time.

Refer to context

## SKETCHES

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

For section → [051735]  
For matrix → [051736]





# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | T6A5       | A2              | (051738)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [051722]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (051351) |  |  | Same as context |
|  |  | (051738) |  |  | Cuts context    |
|  |  | (051724) |  |  | 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>(A)                                                                                                                   | <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>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 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 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 type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input checked="" 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 checked="" 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>0.08m 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

## Basic process

|                                                                                                                                    |          |             |             |
|------------------------------------------------------------------------------------------------------------------------------------|----------|-------------|-------------|
| Sample nos                                                                                                                         | Find nos | Photo nos   | Drawing nos |
|                                                                                                                                    |          | 0501431-736 | SHEET 17    |
| Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D# 05360 |          |             |             |

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date 25/4/17                                                                                                  |
| Initials R.D.C.                                                                                               |
| Checked by M17                                                                                                |

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 loess with a mid orangeish-brown colour and a gravelly-clay composition. The maximum thickness is 0.08m.

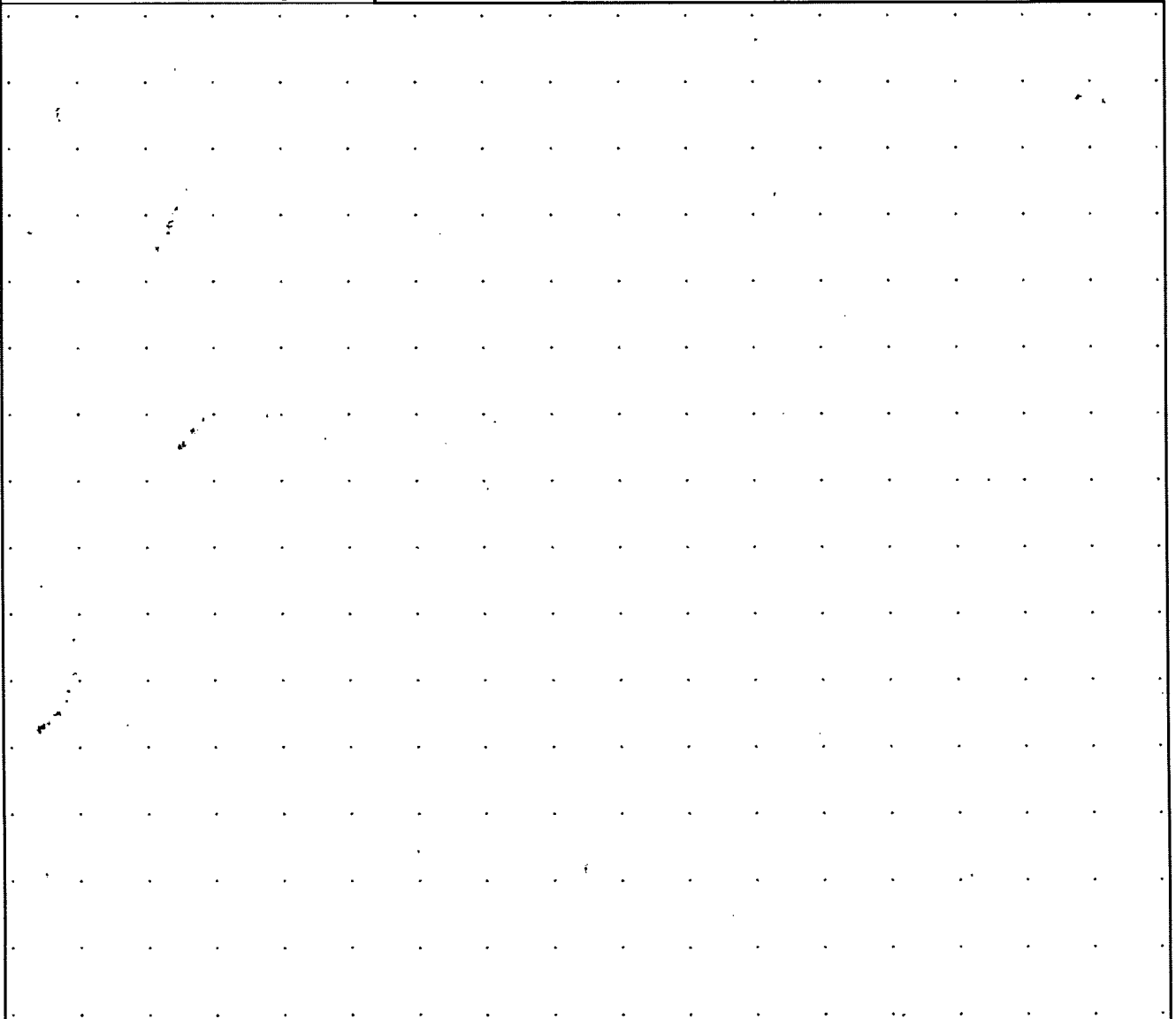
~~This~~ This loess was extended on plan all above the ditch [051722], it seems to be the same fill (051667) in the ditch [051369] a coluvial loess.

Refer to context

051722  
051723

## SKETCHES

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



|           |            |                |                                                                                                        |
|-----------|------------|----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/rench | Context number                                                                                         |
| A14       | TEA OS     |                | (051739)                                                                                               |
| ECB #     | Subgroup   | Parent context | Context type                                                                                           |
|           |            | [051715]       | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |          |
|--|--|----------|--|--|-----------------|----------|
|  |  | (051714) |  |  | Same as context | (052068) |
|  |  | (051739) |  |  | Cuts context    |          |
|  |  | (051715) |  |  | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |          |
| <br><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

[illegible]

### Basic process

| Sample nos | Finds nos | Photo nos                                                              | Drawing nos                                                                                                                        |
|------------|-----------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| /          | /         | 050100449<br>050100450<br><del>050100451</del><br><del>050100452</del> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05365 4 |

construction ☐ use ☒ disuse ☐

Date: 26/9/17

Initials: J. O. S.

Checked by: JH

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 (051739) of Ditch [051715]. This fill is at the bottom of the ditch, under the fill ~~051714~~ (051714). It has lots of chalks and some animal bone, pottery and fired clay. This fill probably is a deliberate backfill, deposited when the ditch was done in order to create a solid fill the way it could ~~not~~ keep the post to create a fence.

Refer to context

## SKETCHES

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

(051714) For Section

(051715) For Plan and (052061)

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                                 |                                                                                                                                   |
|-------------------------|-----------------------------|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 05</b> | Sub-area/Trench<br><b>2</b>     | Context number<br><b>(051740)</b>                                                                                                 |
| ECB#                    | Subgroup                    | Parent context<br><b>OS2300</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |               |  |                                |
|--|--|-----------------|---------------|--|--------------------------------|
|  |  | <b>[051715]</b> |               |  | Same as context                |
|  |  | <b>(051740)</b> |               |  | Cuts context                   |
|  |  | <b>(051732)</b> | <b>OS2274</b> |  | Cut by context <b>[051715]</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 checked="" type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SW                                                                                                                            |  | <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 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 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 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>Thickness</b><br><b>0.33</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*<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                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

**ALLUVIAL LAYER**

## CROSS REFERENCE

## Basic process

construction ☐ use ☐ disuse ☒

|            |           |                                                                                        |                                                                                                                                          |
|------------|-----------|----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                                                              | Drawing nos                                                                                                                              |
|            |           | 0501449,<br>0501450,<br>0501772, 16<br>0501775,<br>0501777, 18<br>0501778,<br>0501850, | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D053654</b> |

|            |                |
|------------|----------------|
| Date       | <b>26/9/17</b> |
| Initials   | <b>J.O.S.</b>  |
| Checked by | <b>MM</b>      |

This form is to be used if finds 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)

1 This context (051740) is a deposit that is being cut by ditch [051715]. This deposit has no finds or inclusions. It probably is an alluvial layer created before the ditch [051715]. This deposit could have been used as an occupation layer for a while, due to most of the structures are cutting it.

Refer to context

## SKETCHES

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

(051714) For Section → (052059) and (052067)  
(051715) For Plan and (052061)



## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (051726) |  |  | Same as context |
|  |  | (051741) |  |  | Cuts context    |
|  |  | (051727) |  |  | 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><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>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

| 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 type="checkbox"/> <input checked="" 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 type="checkbox"/> silt             |                                     |
|                                                                   |                                                        | greyish <input type="checkbox"/> <input type="checkbox"/> grey                                                                        |                          | sandy <input checked="" 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"/>                                          |                                     |
| 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                                                         | <input checked="" type="radio"/>                       | <input type="radio"/>                                                                                                                 | <input type="radio"/>    | <input type="radio"/>                                                    | <input checked="" type="radio"/>    |
| bulk find                                                         | <input type="checkbox"/>                               | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/>                                                 | <input checked="" type="checkbox"/> |

### Basic process

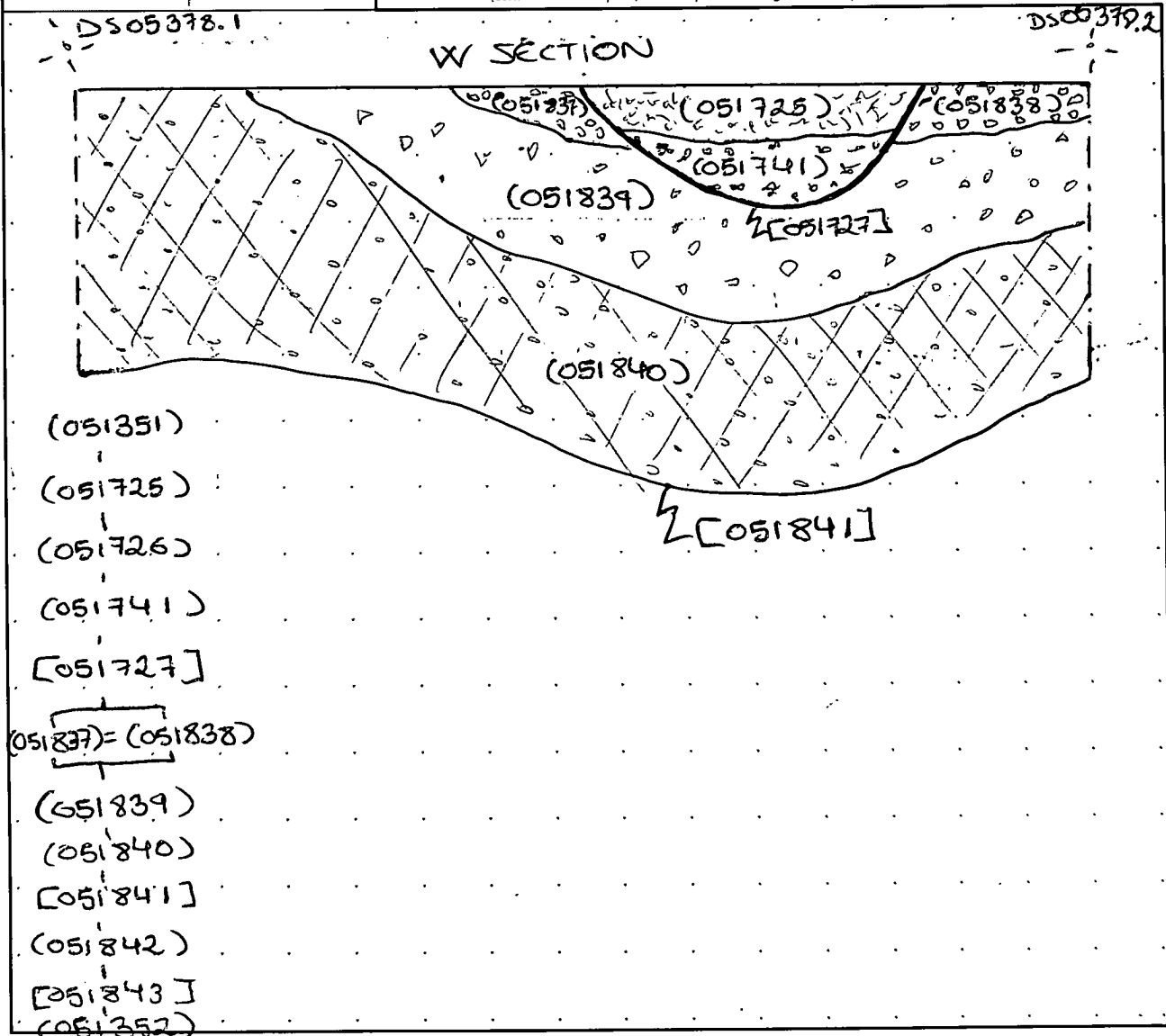
| Sample nos. | Finds nos. | Photo nos.                               | Drawing nos.                                                                                                                       | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
|-------------|------------|------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| /           | /          | 0501525<br>0501526<br>0501527<br>0501528 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 053780 | Date 27/04/17<br>Initials RSR<br>Checked by HH                                                                |

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

Regarding the inclusions, we've documented some piece of pottery from Middle Iron Age, therefore ~~between~~ between the foundation and the abandonment of this construction, should have passed a short-time (in historical and particularly proto-historical terms) as the same pottery has been found in the last layer. From a historical point of view, this could mean that such construction, use and abandonment would be consequence of some type of itinerant social organization such as the classic household society, explaining also the several phytoliths documented in some points around such area.

## 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>#2</b>      | Context number<br><b>(051742)</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context<br><b>[051679]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                   |
|--|--|-----------------|--|--|-------------------|
|  |  | <b>(051743)</b> |  |  | Same as context — |
|  |  | <b>(051742)</b> |  |  | Cuts context —    |
|  |  | <b>(051679)</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>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 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 checked="" 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 checked="" 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 checked="" type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input checked="" 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>0.025m</b>                                                                                                                                                     |  | <b>IRON PANNED GRAVEL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>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>NONE</b> |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>frequency</b><br><b>F</b>                                                                                                                                                          |  | <b>bulk find</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>bulk find</b>                                                                                                                                                                      |  | <b>bulk find</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|                        |                       |                                                                                   |                                                                                                                                                          |
|------------------------|-----------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>—</b> | Finds nos<br><b>—</b> | Photo nos <b>*</b><br><b>IT IS NOT VISIBLE ON PHOTOS AS IT IS UNDER THE WATER</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b># D05369</b> |
|------------------------|-----------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☒ disuse ☐

Date **27/9/17**

Initials **NK**

Checked by **HH**

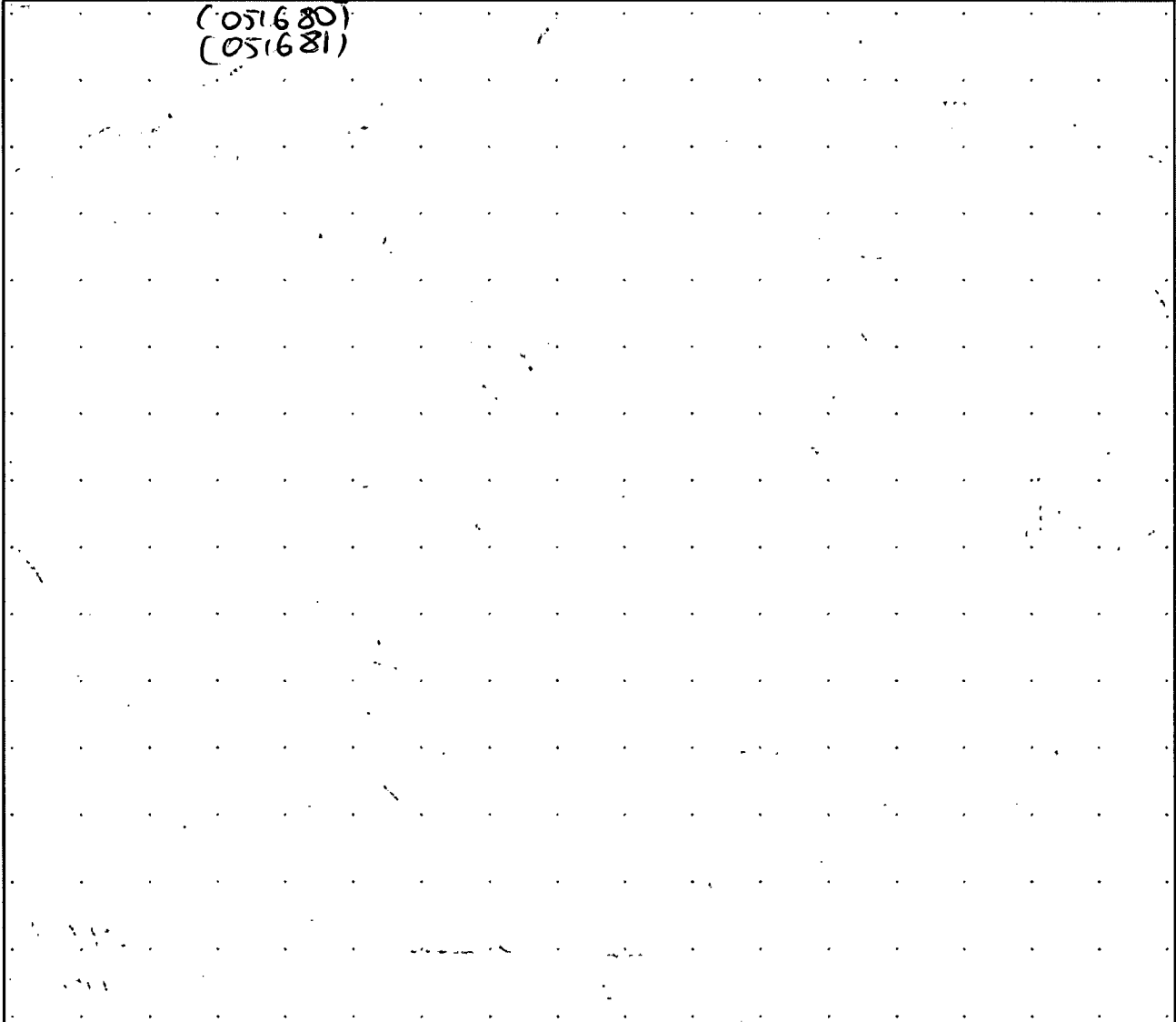
This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

THAT LAYER WERE EXTREMELY SOLID, IRON PANNED TO STONE  
REMAINED FROM THE TIME THIS DITCH WERE DUG OUT TO  
MANAGE THE WATER AND AS IT WERE STREAMING AND STAINING ON  
ITS BOTTOM, CORRODE ALL SURROUNDINGS.

Refer to context:

~~LOS 167~~  
[051679]  
(051680)  
(051681)

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>TEAOS</b> | Sub-area/Trench<br><b>#2</b>     | Context number<br><b>1051743</b>                                                                                       |
| ECB #                    | Subgroup                   | Parent context<br><b>1051679</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|                 |                            |                 |  |                                                    |
|-----------------|----------------------------|-----------------|--|----------------------------------------------------|
| <b>(051804)</b> | <del><b>(051803)</b></del> | <b>(051812)</b> |  | Same as context                                    |
|                 |                            | <b>(051743)</b> |  | Cuts context <input checked="" type="checkbox"/>   |
| <b>(051803)</b> | <b>(051742)</b>            | <b>(051811)</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 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 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 type="checkbox"/> dark <input 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 checked="" 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"/> |                          | 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>0.36M</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                        | <b>LOST IN TRENCHING</b>            |
| 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 checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

### CROSS REFERENCE

|            |           |                                                                 |                                                                                                                                                                     |
|------------|-----------|-----------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos<br>#05046<br>#050147<br>#050148<br>#050149<br>#050171 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input checked="" type="checkbox"/><br><b># D05369</b> |
|------------|-----------|-----------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☐ use ☒ disuse ☐

Date **27/9/17**

Initials **NK**

Checked by **MM**

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

#050172

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

|  |
|--|
|  |
|  |
|  |
|  |
|  |
|  |

~~051 676~~  
051 679  
(051 680)  
(051 681)

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

## STRATIGRAPHY

|  |                     |          |  |  |                   |
|--|---------------------|----------|--|--|-------------------|
|  |                     | (051745) |  |  | Same as context — |
|  | (051813)            | (051744) |  |  | Cuts context —    |
|  | <del>(051813)</del> | (051680) |  |  | 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>Other features</b><br>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)

### 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 checked="" type="checkbox"/> clay | topsoil <input type="checkbox"/>             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> friable                       | brownish <input checked="" type="checkbox"/>                                                  | <input type="checkbox"/> brown          | silty <input type="checkbox"/>    | <input type="checkbox"/> silt    | sandy <input checked="" type="checkbox"/> | <input type="checkbox"/> sand            | geological subsoil <input type="checkbox"/>  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
|                                                                   |                                                        | orangeish <input type="checkbox"/>                                                            | <input type="checkbox"/> orange         | gravelly <input type="checkbox"/> | <input type="checkbox"/> gravel  | peaty <input type="checkbox"/>            | <input type="checkbox"/> peat            | remnant topsoil <input type="checkbox"/>     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
|                                                                   |                                                        | yellowish <input type="checkbox"/>                                                            | <input type="checkbox"/> yellow         |                                   |                                  |                                           |                                          | surface <input type="checkbox"/>             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
|                                                                   |                                                        | reddish <input type="checkbox"/>                                                              | <input type="checkbox"/> red            |                                   |                                  |                                           |                                          | occupation layer <input type="checkbox"/>    |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
|                                                                   |                                                        | blueish <input type="checkbox"/>                                                              | <input type="checkbox"/> blue           |                                   |                                  |                                           |                                          | dumped layer <input type="checkbox"/>        |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
| <b>Thickness</b>                                                  |                                                        |                                                                                               |                                         |                                   |                                  | other* <input type="checkbox"/>           |                                          | deliberate backfill <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
| 0.13m                                                             |                                                        | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> |                                         |                                   |                                  |                                           |                                          | destruction debris <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                        | NONE                     |
| 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 type="checkbox"/> | <input checked="" type="checkbox"/> | <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"/> |
|            |           | # OSD/44  | Surveyed:                                                                                                 | Date 27/9/17                                                                                                  |
|            |           | # OSD/45  | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> | Initials NK                                                                                                   |
|            |           | # OSD/46  | # DOS 369                                                                                                 | Checked by HH                                                                                                 |
|            |           | # OSD/47  |                                                                                                           |                                                                                                               |

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

F10 DITCH, RESULT OF SIDE SLIDING SLUMP

[051679]  
~~051746~~

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

(051680)  
(051681)

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

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub area/Trench | Context number                                                                                         |
| A14       | TEA 05     | S2              | (051745)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | T0516791        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |          |          |  |  |                 |   |
|--|----------|----------|--|--|-----------------|---|
|  |          | (051681) |  |  | Same as context | — |
|  |          | (051745) |  |  | Cuts context    | — |
|  | (051744) | (051813) |  |  | 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 checked="" 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>Length Width Depth Diameter<br>in metres                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                  |
| <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 type="checkbox"/> light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> | <input type="checkbox"/> brownish <input type="checkbox"/> brown                              | <input checked="" type="checkbox"/> clayey <input checked="" type="checkbox"/> clay | <input type="checkbox"/> silty <input type="checkbox"/> silt | <input type="checkbox"/> sandy <input type="checkbox"/> sand |
| <input checked="" type="checkbox"/> moderately compact            | <input checked="" type="checkbox"/> greyish <input type="checkbox"/> grey                                                                                      | <input type="checkbox"/> orangeish <input type="checkbox"/> orange                            | <input type="checkbox"/> gravelly <input checked="" type="checkbox"/> gravel        | <input type="checkbox"/> peaty <input type="checkbox"/> peat |                                                              |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> yellowish <input type="checkbox"/> yellow                                                                                             | <input type="checkbox"/> reddish <input type="checkbox"/> red                                 |                                                                                     |                                                              |                                                              |
| <input type="checkbox"/> friable                                  | <input type="checkbox"/> blueish <input type="checkbox"/> blue                                                                                                 |                                                                                               |                                                                                     |                                                              |                                                              |
| Thickness                                                         |                                                                                                                                                                | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                     | other* <input type="checkbox"/>                              |                                                              |
| 0-2M                                                              |                                                                                                                                                                |                                                                                               |                                                                                     |                                                              |                                                              |
| 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                                                 | NONE                                                         |
| frequency                                                         | F                                                                                                                                                              | F                                                                                             | M                                                                                   | -                                                            | -                                                            |
| bulk find                                                         | <input type="checkbox"/>                                                                                                                                       | <input type="checkbox"/>                                                                      | <input type="checkbox"/>                                                            | <input type="checkbox"/>                                     | <input type="checkbox"/>                                     |

### Basic process

|             |           |                                                  |                                                                                                                                               |                                                                                                               |
|-------------|-----------|--------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos. | Find nos. | Photo nos.                                       | Drawing nos.                                                                                                                                  | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| —           | —         | # 0501466<br># 0501467<br># 0501468<br># 0501469 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input checked="" type="checkbox"/><br>#D 05369 | Date 27/9/11<br>Initials NK<br>Checked by MH                                                                  |

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 LAYER OCCURRED ONLY IN THE MIDDLE OF THE WIDER PART OF THE DITCH, WHERE WERE ALSO THE DEEPEST PART OF IT. THIS LAYER LOOKS LIKE MATERIAL WERE WASHED IN WITH GREAT POWER THAT DESTROYED A BIT UNDERLYING (OS1680) LAYER WHO IS THICKER EVERYWHERE BUT UNDER (OS1745).

Refer to context

~~OS1746P~~  
[OS1679]

## SKETCHES

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

(OS1680)  
(OS1681)



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA05      | S2              | (051747)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | E0517467        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

STRATIGRAPHIC MATRIX

STRATIGRAPHY

|  |  |                   |                   |                 |   |
|--|--|-------------------|-------------------|-----------------|---|
|  |  | (051749)          |                   | Same as context | — |
|  |  | (051747)          | <del>051747</del> | Cuts context    | — |
|  |  | <del>051747</del> | [051679]          | 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><br>                                                                                                                                                                                                                                                                     |  | <b>Width</b><br>                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <b>Depth</b><br>                                                                                                                                                                                                                                                                             |  | <b>Diameter</b><br>                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <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 checked="" 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 checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input checked="" 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 type="checkbox"/><br>sandy <input type="checkbox"/> sand <input checked="" 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 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>0.09m                                                                                                                                                             |                          | 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             | NONE                                |
| 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 checked="" type="checkbox"/> |

## CROSS REFERENCE

|            |           |                      |                                                                                                                                    |
|------------|-----------|----------------------|------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos            | Drawing nos                                                                                                                        |
| —          | —         | # 050464<br># 050465 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br># 005369 |

## Basic process

|              |                                                                         |
|--------------|-------------------------------------------------------------------------|
| construction | use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date         | 27/09/17                                                                |
| Initials     | JK                                                                      |
| Checked by   | HM                                                                      |

This form is incomplete if fields marked with \* are empty. RTO 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 LAYER IS A RESULT OF NATURAL SLUMPING AND SLIDING  
PROCESSES ON A SIDE OF DICH THAT MAKES STEPPED UNEVEN  
SURFACE MORE SMOOTH AND GENTLE.

## SKETCHES

Refer to context

[051679]  
~~[051674]~~  
(051680)  
(051681)

(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>TEAOS</b> | Sub-area/trench<br><b>#2</b>      | Context number<br><b>(051748)</b>                                                                                      |
| ECR #                   | Subgroup                   | Parent context<br><b>[051746]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

STRATIGRAPHIC MATRIX

STRATIGRAPHY

|  |                     |                     |                 |  |                                |
|--|---------------------|---------------------|-----------------|--|--------------------------------|
|  |                     | <b>(051749)</b>     |                 |  | Same as context                |
|  | <del>(051748)</del> | <b>(051748)</b>     |                 |  | Cuts context                   |
|  |                     | <del>(051746)</del> | <b>(051679)</b> |  | Cut by context <b>(051679)</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><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 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 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"/> <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"/><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><b>0.15M</b>                                                                                                                                                      |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                          |                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |
| <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             | <b>NONE</b>                         |
| 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 checked="" type="checkbox"/> |

## CROSS REFERENCE

## Basic process

construction ☐ use ☒ disuse ☐

|            |           |                                              |                                                                                                                                            |
|------------|-----------|----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                    | Drawing nos                                                                                                                                |
|            |           | # 050464<br># 050465<br># 050466<br># 050467 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b># D05 369</b> |

Date **27/9/17**

Initials **NK**

Checked by **HH**

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 IS VERY CLAYEY AND IT IS PROBABLY MATERIAL SEDIMENTED IN WATER WHILE DITCH WERE STILL IN USE. LAMINES OF SAND AND CLAY CAN GIVE A CLUE THAT DITCH WERE LONG USED AND A LOT OF TIME WERE NEEDED TO MAKE THIS LAYER.

Refer to context

10516791  
~~10517163~~

(051680)  
(051681)

## 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>2</b>     | Context number<br><b>(051749)</b>                                                                                      |
| ECB#                    | Subgroup                    | Parent context<br><b>051747</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

STRATIGRAPHIC MATRIX

STRATIGRAPHY

|  |  |                 |                 |  |                                |
|--|--|-----------------|-----------------|--|--------------------------------|
|  |  | <b>(051803)</b> |                 |  | Same as context                |
|  |  | <b>(051749)</b> |                 |  | Cuts context <b>←</b>          |
|  |  | <b>(051747)</b> | <b>(051748)</b> |  | Cut by context <b>(051679)</b> |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Shape                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    | <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> |
| 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 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"/>                                                                       |  |                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

### FILL/DEPOSIT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Compaction                                                                                                                                                       |         | Colour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |          | Composition                                                                                                                                                                                                                                                                                                                                              |                  | <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 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 checked="" 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> |
| <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"/> 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                                                                                                                                                        |         | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          |                                                                                                                                                                                                                                                                                                                                                          |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 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     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|                                                                                                                                                                  |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          | <b>NONE</b>      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| bulk find                                                                                                                                                        |         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                                                                                                                          |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |

### CROSS REFERENCE

### Basic process

construction ☐ use ☒ disuse ☐

Date **27/9/17**

Initials **WK**

Checked by **HM**

|            |           |                                                                          |                                                                                                                                          |
|------------|-----------|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                                                | Drawing nos                                                                                                                              |
|            |           | <b>#0501464</b><br><b>#0501465</b><br><b>#0501466</b><br><b>#0501467</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>#D05369</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)

AS THIS LAYER IS RATHER HOMOGENIC AND THICKER ON SIDE THAN ON THE BOTTOM IT COULD BE RESULT OF MATERIAL SLUMPING FROM THE SIDE OF DITCH.

Refer to context

[051679]

~~[051716]~~

(051680)

(051681)

## SKETCHES

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



|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub area/Trench | Context number                                                                                         |
| A14       | JEAS       | 2               | [051750]                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [051750]        | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |                  |
|--|--|----------|--|--|-----------------|------------------|
|  |  | (051751) |  |  | Same as context | —                |
|  |  | [051760] |  |  | Cuts context    | —                |
|  |  | (051352) |  |  | Cut by context  | 051796<br>051754 |

(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>I <input type="checkbox"/> N-S<br>I <input checked="" type="checkbox"/> E-W<br>↘ <input type="checkbox"/> NE-SW<br>↘ <input type="checkbox"/> NW-SE<br>N<br>                                    |                     | <b>Sides</b><br>1 <input type="checkbox"/> vertical<br>\ <input type="checkbox"/> steep<br>\ <input checked="" type="checkbox"/> moderate<br>\ <input type="checkbox"/> gentle<br>~ <input type="checkbox"/> stepped<br>7 <input type="checkbox"/> undercutting<br><input type="checkbox"/> complex*<br>sloping |                      |                      |
|                                                                                                                                                                                                                                                                                                         |                     | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input checked="" 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><br>90 | <b>Width</b><br>1                                                                                                                                                                                                                                                                                               | <b>Depth</b><br>0.43 | <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"/>                                       |                     |                                                                                                                                                                                                                                                                                                                 |                      |                      |

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

## INTERPRETATION

| <i>Compaction</i>                                                 | <input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <i>Colour</i>                                                                                 | 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"/> | <i>Composition</i>              | 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"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <i>Thickness:</i>                                                 |                                                                                                                                                       |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                    |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <i>Inclusions</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"/> |

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                                                                                                                                                 |
|------------|-----------|-----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
|            |           | 0501479<br>↓<br>0501484<br>0501590<br>0501591 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>005362/005363 S#28<br>005384 S#35 |

# ADDITIONAL INFORMATION

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

CUT OF A DITCH TERMINUS WITH 4 FILLS ([051751], [051752], [051753] & [051759])

AS THE AREA IS VERY GRAVELLY AND THE FEATURES ARE NOT EASY TO DIFFERENTIATE FROM THE NATURAL, FIRSTLY WE ~~EXCAVATED~~ THOUGHT IT WAS A PIT, SO I DUG A PART OF THE SECTION, BUT FINALLY I DUG THE OTHER HALF TO SEE THE RELATION BETWEEN IT AND TWO PITS AND IT WAS THE MOMENT WE REALISED IT WASN'T A PIT, IT WAS THE TERMINUS OF A ~~SHORT~~ SHORT DITCH THAT IS CUT BY TWO PITS [051754] AND [051795].

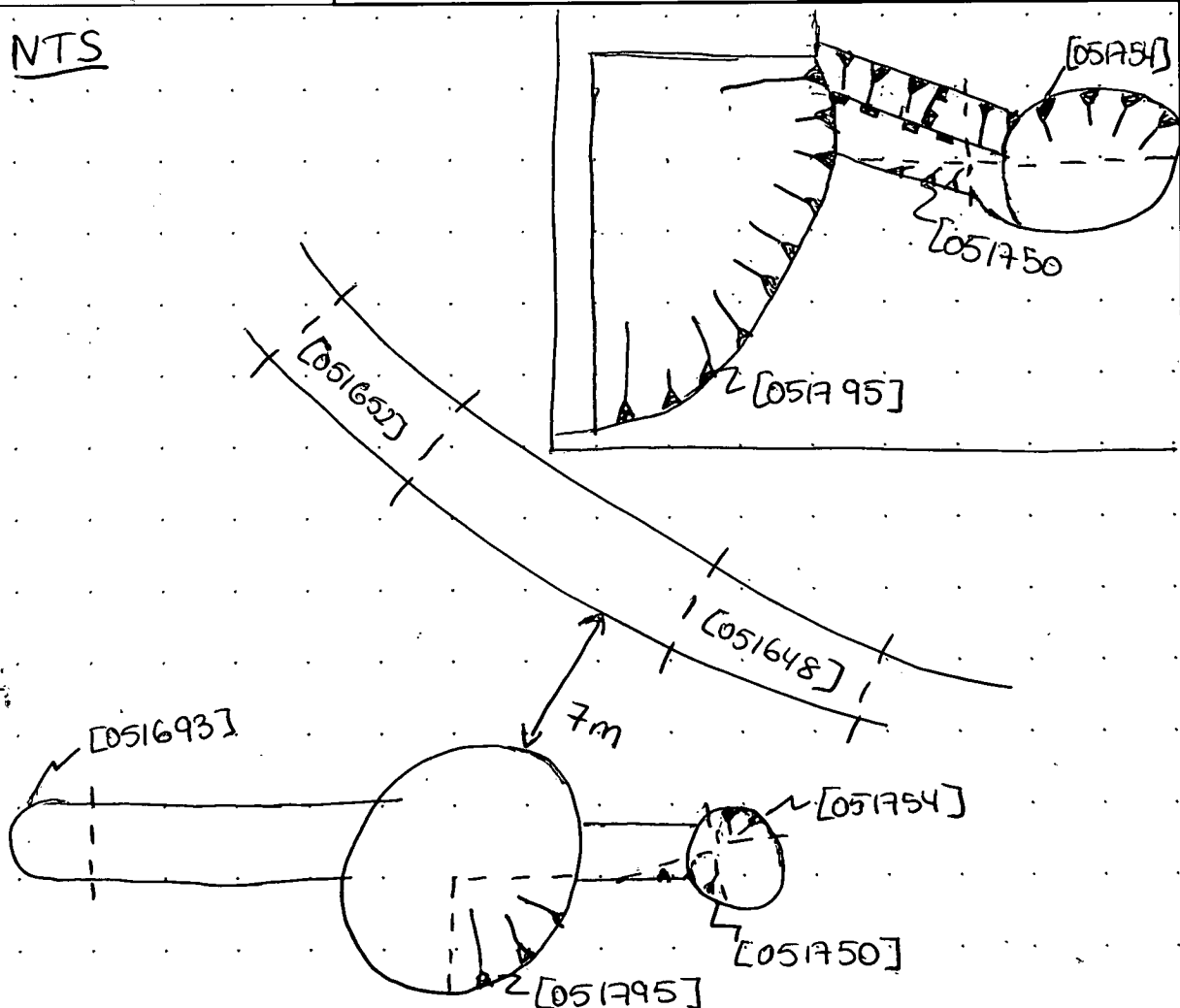
THE DITCH IS LOCATED ABOUT 7 M NORTH FROM A RING-DITCH (PROBABLY A BRONZE-IRON AGE HOUSE) AND THE POTTERY IS VERY SIMILAR FROM THE PIECES THAT WERE FOUND AT THE RING-DITCH, BUT IS OLDER THAN THE TWO PITS THAT ARE CUTTING IT.

Refer to context [051751] FOR SECTION

SKETCHES

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

NTS





# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA 5      | 2               | (051751)                                                                                               |
| ECB#      | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [051750]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |          |
|--|--|----------|--|--|-----------------|----------|
|  |  | (051759) |  |  | Same as context | —        |
|  |  | (051751) |  |  | Cuts context    | —        |
|  |  | [051750] |  |  | Cut by context  | [051754] |

### 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<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"/>                                                                       |  |                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                    |

- ☐ 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                                                                                                                                                       |                          | 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 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"/> |                          | 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"/>                                                                                                                                                                                                                                                                                                                          |                                     |
| 0.33                                                                                                                                                             |                          | 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                                                                                                                                                        | O                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          |                                     |
| bulk find                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                 | <input checked="" 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 | Finds nos | Photo nos | Drawing nos                                                                                               |
|            |           | 0501477   | Surveyed:                                                                                                 |
|            |           | 0501484   | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|            |           | 0501590   | D05362 / D05363 S#28                                                                                      |
|            |           | 0501591   | D05384 S#35                                                                                               |

### Basic process

|                                       |                              |                                            |
|---------------------------------------|------------------------------|--------------------------------------------|
| construction <input type="checkbox"/> | use <input type="checkbox"/> | disuse <input checked="" type="checkbox"/> |
| Date                                  | 28/9/17                      |                                            |
| Initials                              | PVT                          |                                            |
| Checked by                            | HM                           |                                            |

# ADDITIONAL INFORMATION

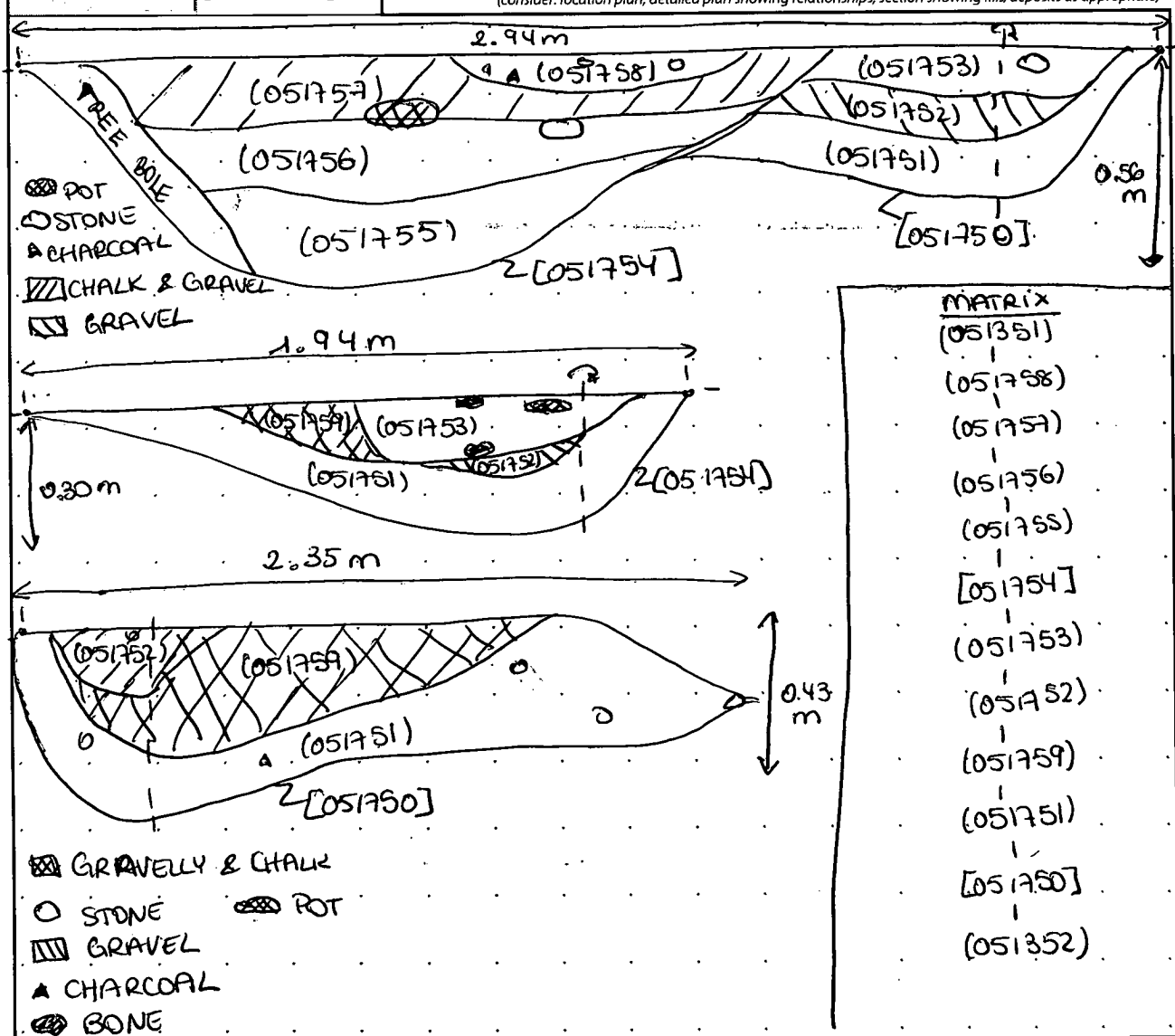
(any further details that may be important for understanding the context, including items marked \* overleaf)

NATURAL INFILLING OF THE CUT OF THE DITCH [051750]  
 I FOUND OCCASIONAL SMALL AND ANGULAR STONES AND FLINTS.  
 ALSO, LOT OF ANIMAL BONES, MOST OF THEM LOCATED AT THE  
 EAST OF THE SLOT, NEXT TO THE CUT OF THE PIT [051795].  
 ALSO, THE FILL CONTAINS SOME PIECES OF CHARCOAL, BUT  
 VERY FEW AND REALLY TINY, NOT ENOUGH TO TAKE SAMPLES).

Refer to context [051750] FOR PLAN

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

## SKETCHES



## STRATIGRAPHY

|  |  |          |  |          |                 |          |
|--|--|----------|--|----------|-----------------|----------|
|  |  | (051753) |  |          | Same as context | —        |
|  |  | (051752) |  | (051759) | Cuts context    | —        |
|  |  | (051751) |  |          | Cut by context  | (051754) |

(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**

in metres

**Length**

**Width**

**Depth**

**Diameter**

**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 type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
|  |  | 0501477<br>0501590<br>0501591<br>0501484 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05362 / D05363<br>SHEET 28 D05384<br>SA 35 | Date 27/9/11<br>Initials PVT<br>Checked by MH                                                                 |

# ADDITIONAL INFORMATION

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

FILL OF THE CUT OF THE ~~DITCH~~ <sup>DITCH</sup> [051750].

VERY THIN LAYER, WITH A COMPOSITION AND A COLOR THAT LOOKS VERY SIMILAR ~~TO~~ THE NATURAL, SO MAYBE IT'S A SLUMP FROM THE NATURAL THAT WERE PLACED NEXT TO THE FEATURE.

THE STONES AND FLINTS WERE SMALL AND MEDIUM SIZE AND VERY ANGULAR. THERE ARE SOME DOTS OF CHALK THAT MAYBE CAME FROM ~~THE~~ A MIX WITH THE FILL (051759).

Refer to context ~~[051751]~~ (051751) FOR SECTION  
[051754] FOR PLAN

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      | 2               | (051753)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | (051750)        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |          |          |          |  |                 |          |
|--|----------|----------|----------|--|-----------------|----------|
|  |          | (051754) |          |  | Same as context | —        |
|  |          | (051753) |          |  | Cuts context    | —        |
|  | (051759) |          | (051752) |  | Cut by context  | (051754) |

### 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>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>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 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 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                                                                                                                                                                                                                                                                                                        | <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>0.15                                                                                                                                                              | 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 <input type="checkbox"/>                                                                                                                                                    | bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

|            |           |                                          |                                                                                                                                                                   |
|------------|-----------|------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                | Drawing nos                                                                                                                                                       |
|            |           | 0501477<br>0501590<br>0501591<br>0501488 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05362/D05363<br>SHEET 28 D0384<br>SH35 |

### Basic process

construction ☐ use ☐ disuse ☒

Date 26/9/17

Initials PUT

Checked by MH

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 OF THE CUT OF THE ~~PI~~<sup>DITCH</sup> [051750].

IT'S THE ~~FILL~~ RICHEST FILL OF THIS PIT WITH SOME ANIMAL BONES AND POT (BRONZE-IRON AGE).

AS IT'S THE TOP LAYER, ~~BY~~ THE PIT COULD BE FROM AN EARLIER PERIOD, MAYBE EARLY BRONZE AGE.

| Refer to context  | (051751) FOR SECTION                                                                                          | SKETCHES |
|-------------------|---------------------------------------------------------------------------------------------------------------|----------|
| [051750] FOR PLAN | (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>2</b>       | Context number<br><b>[051754]</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>[051754]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |                                        |
|--|--|----------|--|--|-----------------|----------------------------------------|
|  |  | (051755) |  |  | Same as context | —                                      |
|  |  | (051754) |  |  | Cuts context    | (051750) (051752)<br>(051751) (051753) |
|  |  | (051753) |  |  | 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 checked="" type="checkbox"/> |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                              |                      |                      | <input checked="" 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 type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input checked="" type="checkbox"/> complex* |                      |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br>—                                                                                                                                                                                                                                                            | <b>Width</b><br>—                                                                                                                                                                                                                            | <b>Depth</b><br>0.57 | <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"/> | <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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| frequency<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

|            |           |                    |                                                                                                                                               |
|------------|-----------|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos          | Drawing nos                                                                                                                                   |
| /          | /         | 0501477<br>0501478 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 05862<br>SHEET 28 |

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date: 27/9/17                                                                                                 |
| Initials: PVT                                                                                                 |
| Checked by: HM                                                                                                |

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 A PIT WITH 4 FILLS ([051755], [051756], [051757] AND [051758]). IT'S CUTTING THE DITCH [051750] SO IT'S MORE MODERN. ALSO, NEXT TO IT THERE'S A TREE BOLE THAT CUT THE WESTERN PART OF THE PIT.

THE PIT IS LOCATED ABOUT 7 M NORTH TO A RING-DITCH (PROBABLY A HOUSE) FROM THE IRON AGE, AND THE POT THAT I FOUND IN THE PIT IS THE SAME KIND AS THE ONE COMING FROM THE RING-DITCH.

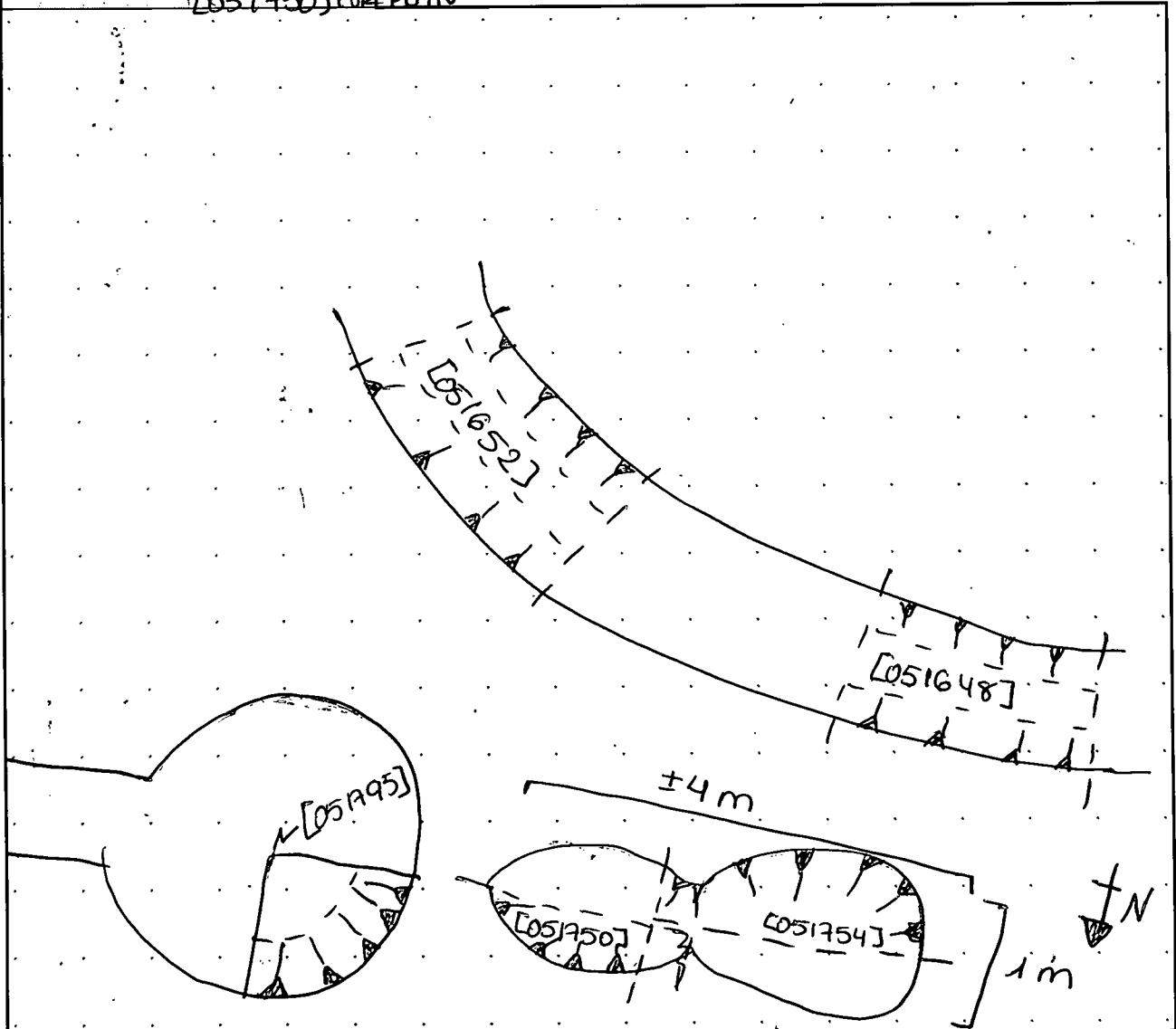
ONE OF THE SIDES (THE ONE THAT CUTS THE OTHER PIT) IS VERY MODERATE, BUT THE ONE THAT IS CUT BY THE TREE BOLE I CAN'T BE SURE ABOUT THE SHAPE. ALSO, THE FEATURE HAS AN OVAL SHAPE, SO THE LONGEST PART IS ABOUT 1.80 M AND THE SHORTEST ONE 1 METER.

Refer to context

[051751] FOR SECTION  
[051750] FOR PLAN

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

## SKETCHES





# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA5</b> | Sub area/Trench<br><b>2</b>       | Context number<br><b>(051755)</b>                                                                                      |
| ECB#                    | Subgroup                  | Parent context<br><b>[051754]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |       |
|--|--|-----------------|--|--|-----------------|-------|
|  |  | <b>(051756)</b> |  |  | Same as context | _____ |
|  |  | <b>(051755)</b> |  |  | Cuts context    | _____ |
|  |  | <b>[051754]</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"/> |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 | <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<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 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 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                                                                                     | <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 | <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>0.14</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 <input checked="" type="radio"/>                                                                                                                                            | 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"/> |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| bulk find <input type="checkbox"/>                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |

## CROSS REFERENCE

|            |           |                    |                                                                                                                                              |
|------------|-----------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos          | Drawing nos                                                                                                                                  |
|            |           | 0501477<br>0501478 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05362<br>SHEET 28 |

## Basic process

construction ☐ use ☐ disuse ☒

Date: **27/9/17**

Initials: **PVT**

Checked by: **HH**

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 OF THE CUT OF THE PIT [051754].  
IT'S A NATURAL INFILLING MIXED WITH THE NATURAL SOIL;  
SO IT CONTAINS SOME SMALL AND MEDIUM ANGULAR STONES AND  
FLINTS. NO FINDS COMING FROM THIS FILL.

Refer to context { (051751) FOR SECTION  
[051750] FOR PLAN

## SKETCHES

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

## STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (051755) |  |  | Same as context | — |
|  |  | (051756) |  |  | Cuts context    | — |
|  |  | (051755) |  |  | 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 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>Length Width Depth Diameter<br>in metres                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                                   |  |
| <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

### Basic process

|            |           |                  |                                                                                                                                              |                                                                                                               |
|------------|-----------|------------------|----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos        | Drawing nos                                                                                                                                  | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| /          | /         | 051477<br>051478 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05362<br>SHEET 28 | Date: 27/9/17<br>Initials: PVT<br>Checked by: HM                                                              |

*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 OF THE CUT OF THE PIT [051754].

IT CONTAINS SOME MEDIUM SUBANGULAR STONES AND SOME  
 RECES OF POT IN A VERY BAD PRESERVATION STATE, THAT ARE  
 FROM THE EARLY IRON AGE PERIOD.

Refer to context (051751) FOR SECTION  
 (051750) FOR PLAN

SKETCHES

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

## STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (051758) |  |  | Same as context | — |
|  |  | (051759) |  |  | Cuts context    | — |
|  |  | (051756) |  |  | Cut by context  | — |

(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                                                                                                                                                                                                                                                         | 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

Shape result of: (tick all that apply)  
 design ☐ material cut into ☐ natural processes ☐ degree of truncation ☐ uncertain ☐

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"/> |
| /          | /         | 0501477<br>0501478 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05362<br>Sheet 28 | Date: 27/9/17<br>Initials: PVT<br>Checked by: MM                                                              |

# ADDITIONAL INFORMATION

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

~~FILL~~ ~~CUT~~ OF ~~THE~~ THE CUT OF THE PIT [051354].

THE COMPOSITION IS VERY GRAVELLY AND CHALKY, SO IT SUGEST A NATURAL INFILLING.

UNDERLINE A PIECE OF POT THAT WAS AT THE SECTION AND LOCATED BETWEEN TWO FILLS (051756) AND (051757) BUT INSIDE THIS FILL (051757). IT'S A PART OF A BASE USED TO PLACE ROUND POT DURING THE ~~PREP~~ PREPARATION OF THE POTTERY PROCESS, AND IT'S VERY SIMILAR TO A PIECE THAT ~~WAS~~ WAS FOUND IN THE CUT OF THE RING DITCH [051642]. THE DATE FOR THIS PIECE IS THE IRON AGE PERIOD.

Refer to context (051761) FOR SECTION  
[051750] FOR PLAN

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

SKETCHES



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/field | Sub-area/trench | Context number                                                                                         |
| A14       | TEA5       | 2               | (051758)                                                                                               |
| ECB#      | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [051754]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (051351) |  |  | Same as context | — |
|  |  | (051758) |  |  | Cuts context    | — |
|  |  | (051757) |  |  | 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 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 | <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>0.16                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 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"/> 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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency <input type="checkbox"/> bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

|            |           |                    |                                                                                                                                              |
|------------|-----------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos          | Drawing nos                                                                                                                                  |
|            |           | 0501477<br>0501478 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05362<br>SHEET 28 |

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date 27/8/17                                                                                                  |
| Initials PVT                                                                                                  |
| Checked by HM                                                                                                 |

# ADDITIONAL INFORMATION

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

FILL OF THE CUT OF THE PIT [051754].

THE SOIL WAS MIXED WITH SOME SMALL ANGULAR STONES AND FLINTS, AND REST OF CHARCOAL, BUT VERY FEW PIECES AND SMALL, NOT FOR TAKING SAMPLES. AT THE SURFACE I FOUND SOME ANIMAL BONES, BUT VERY FRAGMENTED.

Refer to context (051751) FOR SECTION  
[051750] FOR PLAN

SKETCHES

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



## STRATIGRAPHY

|  |  |          |          |  |                 |   |
|--|--|----------|----------|--|-----------------|---|
|  |  | (051753) |          |  | Same as context | — |
|  |  | (051754) | (051752) |  | Cuts context    | — |
|  |  | (051751) |          |  | Cut by context  | — |

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

## INTERPRETATION

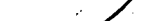
|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <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<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"/>                                       |  |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |

(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"/>                                              |      |         |          |     |            |    |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|------|---------|----------|-----|------------|----|
|  |  | 0501481<br>↓<br>0501484 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05362 / D05363<br>SHEET 28 | <table border="1"> <tr> <td>Date</td> <td>27/9/13</td> </tr> <tr> <td>Initials</td> <td>PJT</td> </tr> <tr> <td>Checked by</td> <td>MM</td> </tr> </table> | Date | 27/9/13 | Initials | PJT | Checked by | MM |
| Date                                                                                | 27/9/13                                                                             |                         |                                                                                                                                                       |                                                                                                                                                            |      |         |          |     |            |    |
| Initials                                                                            | PJT                                                                                 |                         |                                                                                                                                                       |                                                                                                                                                            |      |         |          |     |            |    |
| Checked by                                                                          | MM                                                                                  |                         |                                                                                                                                                       |                                                                                                                                                            |      |         |          |     |            |    |

# ADDITIONAL INFORMATION

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

FILL OF THE CUT OF THE DITCH [051750]

IT'S A FILL WITH A DIFFERENT COMPOSITION FROM THE OTHERS AS IT CONTAINS LOT OF CHALK AND VERY SMALL ROUND STONES AND I'M NOT SURE IF IT'S A PART OF THE NATURAL THAT GOT INTO THE PIT. NO FINDS IN IT.

| Refer to context | [051751] FOR SECTION | SKETCHES                                                                                                      |
|------------------|----------------------|---------------------------------------------------------------------------------------------------------------|
| [051750] FOR     | PLAN                 | (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>AREA 2</b>  | Context number<br><b>(051760)</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context<br><b>[051895]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |   |
|--|--|-----------------|--|--|-----------------|---|
|  |  | <b>(051890)</b> |  |  | Same as context |   |
|  |  | <b>(051760)</b> |  |  | Cuts context    | ✓ |
|  |  | <b>(051891)</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>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>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><br>                                                                                                                                                                                                                                                                                   |  | <b>Width</b><br>                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <b>Depth</b><br>                                                                                                                                                                                                                                                                             |  | <b>Diameter</b><br>                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <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 |                          | 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 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>0.13 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                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                                                                                                                                                                                                                                                                            |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency                                                                                                                                                                             | M                        | M                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          |                                                                                                                                                                                                                                                                            |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                   | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

|                 |                |                                            |                                                                                                                                                           |
|-----------------|----------------|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>/ | Finds nos<br>/ | Photo nos<br>0501562<br>0501563<br>0501451 | Drawing nos<br>D05389<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05490 |
|-----------------|----------------|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                       |                                         |                                            |
|---------------------------------------|-----------------------------------------|--------------------------------------------|
| construction <input type="checkbox"/> | use <input checked="" type="checkbox"/> | disuse <input checked="" type="checkbox"/> |
| Date                                  | 29/09/17                                |                                            |
| Initials                              | E.L.                                    |                                            |
| Checked by                            | L.H.                                    |                                            |

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

0501844/0501845  
0501975/0501976

# ADDITIONAL INFORMATION

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

IT IS A LARGE DELIBERATE BACKFILL INSIDE A PIT. THE FILL IS VERY  
HETEROGENEOUS FORMED OF DIFFERENT BANDS THAT ALTERNATE DIFFERENT  
EPISODES OF DELIBERATE ~~IN~~ BACKFILL  
THERE ARE SEVERAL FRAGMENTS OF POTTERY (ALL OF THEM IRON AGE)  
AND ALSO FRAGMENTS OF ANIMAL BONES (SKULL OF A COW)

Refer to context [051895]

## SKETCHES

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

SEE (051890) & [051895]  
SEE (051891)

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TE45</b> | Subarea/Field<br><b>2</b>         | Context number<br><b>(051762)</b>                                                                                      |
| CB#                     | Subgroup                  | Parent context<br><b>[051764]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(051351)</b> |  |  | Same as context |
|  |  | <b>(051762)</b> |  |  | Cuts context    |
|  |  | <b>(051763)</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>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>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 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 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 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 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                                                                                                |   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency                                                                                                                                                                             | F |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| bulk find                                                                                                                                                                             |   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

## Basic process

|            |          |                    |                                                                                                                                        |
|------------|----------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Find nos | Photo nos          | Drawing nos                                                                                                                            |
|            |          | 0501462<br>0501463 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>05365</b> |

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>26.09.17</b>                                                                                          |
| Initials <b>JK</b>                                                                                            |
| Checked by <b>HM</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)

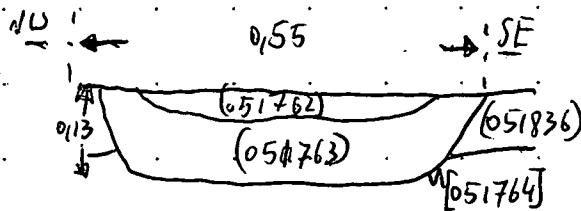
Top Fill of small pit [051764] overlies lower fill (051763)  
and contained lots of small pieces of charcoal.  
Fill probably was result of deliberate backfill

Refer to context

For plan [051764]

## SKETCHES

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



TS (051350)  
SS (051351)  
(051762)  
(051763)  
[051764]  
[051764]  
(051764)  
NAI (051352)



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>1E45</b> | Sub-area/trench<br><b>2</b>       | Context number<br><b>(051763)</b>                                                                                      |
| ECB#                    | Subgroup                  | Parent context<br><b>[051764]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                          |
|--|--|-----------------|--|--|--------------------------|
|  |  | <b>(051762)</b> |  |  | Same as context          |
|  |  | <b>(051763)</b> |  |  | Cuts context <b>1E45</b> |
|  |  | <b>[051764]</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>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 checked="" 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 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 type="checkbox"/> clay <input type="checkbox"/><br>silty <input checked="" 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>0.13</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 <b>F</b>                                                                                                                                                                    | bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

### Basic process

|                        |                       |                                                      |                                                                                                                                                              |                                                                                                               |
|------------------------|-----------------------|------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| <b>Sample nos</b><br>/ | <b>Finds nos</b><br>/ | <b>Photo nos</b><br><b>0501462</b><br><b>0501463</b> | <b>Drawing nos</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>05365</b> | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|                        |                       |                                                      |                                                                                                                                                              | Date <b>26.09.17</b>                                                                                          |
|                        |                       |                                                      |                                                                                                                                                              | Initials <b>TK</b>                                                                                            |
|                        |                       |                                                      |                                                                                                                                                              | Checked by <b>HM</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)

lower fill of pit (051764) was overlain by top fill (051762)  
in SW part overlies ~~base~~ (051836) ~~of older pit~~

Fill was probably a result of natural infilling and water activity.

Refer to context

For section (051762)  
For plan (051764)

## 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>TEA5</b> | Sub-area/Trench<br><b>2</b>       | Context number<br><b>[051764]</b>                                                                                      |
| ECB #                   | Subgroup                  | Parent context<br><b>[051764]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |                 |                    |  |  |                                                    |
|--|-----------------|--------------------|--|--|----------------------------------------------------|
|  |                 | <b>(051763)</b>    |  |  | Same as context                                    |
|  |                 | <b>[051764]</b>    |  |  | Cuts context <b>(051836)</b><br><b>NAT(051352)</b> |
|  | <b>(051836)</b> | <b>NAT(051352)</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 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><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input checked="" 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*<br>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><br><b>0.40</b>                                                                                                                                                                                                                                                             | <b>Width</b><br><b>0.55</b> | <b>Depth</b><br><b>0.13</b>                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <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 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>                                                                                                                                                           |                          | 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

construction ☒ use ☐ mine ☐

|            |                 |
|------------|-----------------|
| Date       | <b>26.09.17</b> |
| Initials   | <b>JK</b>       |
| Checked by | <b>HN</b>       |

|            |          |                                  |                                                                                                                                        |
|------------|----------|----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Find nos | Photo nos                        | Drawing nos                                                                                                                            |
|            |          | <b>0501462</b><br><b>0501463</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>05365</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 small pit, was filled by (051762) and (051763)  
was located on NE edge of big older pit (051835) and  
cut through ~~the~~ (051836) of this pit.  
colluvial layer

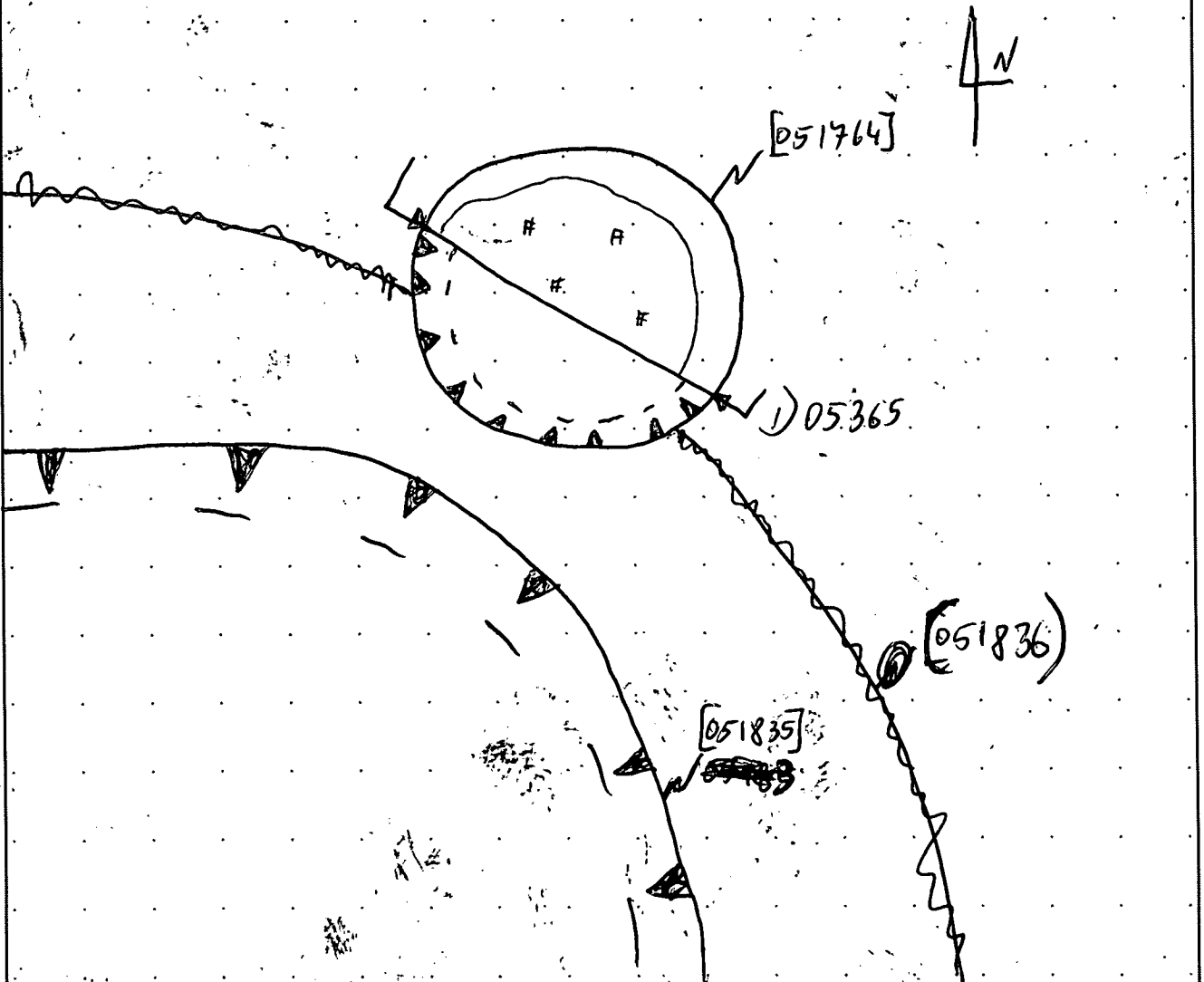
Refer to context

For section  
(051762)

## SKETCHES

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

Not in scale.



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                   |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>2</b>       | Context number<br><b>(051765)</b>                                                                                      |
| ECB#                    | Subgroup                   | Parent context<br><b>[051766]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>051351</b> |  |  | Same as context |
|  |  | <b>051765</b> |  |  | Cuts context    |
|  |  | <b>051766</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<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>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 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 type="checkbox"/><br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input checked="" 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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <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

|                |               |                                             |                                                                                                                                                                |
|----------------|---------------|---------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br> | Finds nos<br> | Photo nos<br><b>0501359,<br/>0501362-63</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>05368 SHEET 27</b> |
|----------------|---------------|---------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>26.9.17</b>                                                                                           |
| Initials <b>K.C.</b>                                                                                          |
| Checked by <b>M.H.</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)

INFILLING OF A STALL NITCH COMPOSED BY A SILTY-SAND SOIL  
CONTAINING SMALL FRAGMENTS OF CHARCOAL AND GRAVEL IN  
THE MIDDLE, OTHERWISE STERILE.

SAC 05/11

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

SEE (051711)

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|           |            |                 |                                                                                             |
|-----------|------------|-----------------|---------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                              |
| A14       | TEA 05     | 2               | 051766                                                                                      |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                |
|           |            | 051766          | cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |        |  |  |                 |  |
|--|--|--------|--|--|-----------------|--|
|  |  | 051765 |  |  | Same as context |  |
|  |  | 051766 |  |  | Cuts context    |  |
|  |  | 051767 |  |  | Cut by context  |  |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                         |       |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Shape                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                         |       |                                                                                                                                                                                                                                                          | <p>pit <input type="checkbox"/></p> <p>post-hole <input type="checkbox"/></p> <p>stake-hole <input type="checkbox"/></p> <p>ditch <input checked="" 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> |  |
| 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"/> |  |                                                                                                                                                                                                                                                                                                         |       |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| Orientation                                                                                                                                                                                                                                                                                        |  | Sides                                                                                                                                                                                                                                                                                                   |       | Base                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| <p>I <input type="checkbox"/> N-S</p> <p>H <input type="checkbox"/> E-W</p> <p><input checked="" type="checkbox"/> NE-SW</p> <p><input type="checkbox"/> NW-SE</p> <p>N <input type="checkbox"/></p>                                                                                               |  | <p><input type="checkbox"/> vertical</p> <p><input checked="" type="checkbox"/> steep</p> <p><input type="checkbox"/> moderate</p> <p><input type="checkbox"/> gentle</p> <p><input type="checkbox"/> stepped</p> <p><input type="checkbox"/> undercutting</p> <p><input type="checkbox"/> complex*</p> |       | <p><input type="checkbox"/> flat</p> <p><input checked="" type="checkbox"/> concave</p> <p><input type="checkbox"/> v-shaped</p> <p><input type="checkbox"/> sloping</p> <p><input type="checkbox"/> uneven</p> <p><input type="checkbox"/> complex*</p> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| Dimensions                                                                                                                                                                                                                                                                                         |  | Length                                                                                                                                                                                                                                                                                                  | Width | Depth                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| in metres                                                                                                                                                                                                                                                                                          |  | 0.75 (slot)                                                                                                                                                                                                                                                                                             | 0.55  | 0.28                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| 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"/>                                                                                             |  |                                                                                                                                                                                                                                                                                                         |       |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |

### FILL/DEPOSIT

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

### DESCRIPTION

### INTERPRETATION

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

### CROSS-REFERENCE

### Basic process

construction ☒ use ☐ disuse ☐

|            |         |
|------------|---------|
| Date       | 26.9.17 |
| Initials   | LC      |
| Checked by | HM      |

|            |           |                       |                                                                                                                                 |
|------------|-----------|-----------------------|---------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos             | Drawing nos                                                                                                                     |
| /          | /         | 0501359<br>0501362-63 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>05368 |

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

SHEET 27

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

~~THE~~ OUT OF THE NIGHT GO

TNC DITCH CUT THE FILL OF A PREVIOUS NORTH-SOUTH ORIENTATED DITCH

SKETCHES

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

SEE [051713]



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA 5      | 2               | (051767)                                                                                               |
| ECB#      | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [051768]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 051766 |  |  | Same as context |
|  |  | 051767 |  |  | Cuts context    |
|  |  | 051768 |  |  | 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 | 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 type="checkbox"/> moderately compact<br><input checked="" type="checkbox"/> loose<br><input checked="" type="checkbox"/> friable | light <input type="checkbox"/> mid <input 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 type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input checked="" 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 checked="" type="checkbox"/><br>gravelly <input checked="" type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |  |
| Thickness                                                                                                                                                                   | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                          |  |
| 0.55                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                          |  |
| 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

|            |           |            |                                                                                                                                             |
|------------|-----------|------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos  | Drawing nos                                                                                                                                 |
|            |           | 0501494-95 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 05368 sheets 27 |

|                                                                                                                |
|----------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> discard <input checked="" type="checkbox"/> |
| Date 26.9.17                                                                                                   |
| Initials L.C.                                                                                                  |
| Checked by HH                                                                                                  |

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)

NATURAL INFILLING OF AN NORTH/SOUTH ORIENTATED NICH  
THE INFILLING IS COMPOSED BY A SANDY SOIL WITH A LOT OF GRAVEL  
AND SMALL STONES; SOME FRAGMENTS OF CHARCOAL HAS BEEN  
FOUND IN IT BUT NOT POTTERY NOT EVEN BONES  
THE FILL HAS BEEN CUT ON THE SOUTHERN PART BY THE RING DITCH  
[051713] AND ON THE NORTHERN PART BY THE SMALL NICH [051766]

Refer to context

## SKETCHES

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

SEE (051711)



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|           |            |                |                                                                                                        |
|-----------|------------|----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Arch  | Context number                                                                                         |
| A.14      | TEA 5      | 2              | [051768]                                                                                               |
| ECB#      | Subgroup   | Parent context | Context type                                                                                           |
|           |            | [051768]       | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input 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 checked="" 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>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>(N)                                                                                                                              |  | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input type="checkbox"/> steep<br>L <input checked="" 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 checked="" 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><br>2m (401)                                                                                                                                                                                                                                                                                      | <b>Width</b><br>950 | <b>Depth</b><br>0.55                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <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 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                                                                                                                                                                  | 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 | Finds nos | Photo nos  | Drawing nos                                                                                                                                 |
|            |           | 0501494-95 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>05368<br>SHEET 28 |

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date 26.9.17                                                                                                  |
| Initials L.C.                                                                                                 |
| Checked by HH                                                                                                 |

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)

CUT OF A NORTH/SOUTH ORIENTATED DITCH LOCALIZED IN  
THIS AREA AND SUCCESFULLY CUT BY THE ~~THE~~ SMALL DITCH  
[051766] AND BY THE ~~DING~~ DITCH OF THE "ROUNDHOUSE"

## SKETCHES

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

SCC (051713)

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEAS</b> | Sub-area/Trench<br><b>AREA2</b>   | Context number<br><b>051469</b>                                                                                        |
| ECB#                    | Subgroup                  | Parent context<br><b>(051477)</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |  |
|--|--|-----------------|--|--|-----------------|--|
|  |  | <b>051350</b>   |  |  | Same as context |  |
|  |  | <b>(051469)</b> |  |  | Cuts context    |  |
|  |  | <b>(051470)</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"/> |  |                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                   | <p>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"/></p> |  |  |
| <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><br>                                                                                                                                                                                                                                                                     |  | <b>Width</b><br>                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |
| <b>Depth</b><br>                                                                                                                                                                                                                                                                            |  | <b>Diameter</b><br>                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |
| <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 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 type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat |                          | <p>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 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"/></p> |  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b><br><b>0, 0.34 m</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                                                                                                                                                                             | 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

construction ☐ use ☒ disuse ☒

|                               |                       |                                     |                                                                                                                                                                                       |
|-------------------------------|-----------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S: 05238</b> | Finds nos<br><b>/</b> | Photo nos<br><b>0501452-0501457</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. 5366, D. 5367</b><br><b>(SHEET 30)</b> |
|-------------------------------|-----------------------|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|            |                 |
|------------|-----------------|
| Date       | <b>06/01/17</b> |
| Initials   | <b>V.D.</b>     |
| Checked by | <b>MM</b>       |

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

THE CONTEXT IS A DELIBERATE BACKFILL OF A DITCH.  
 [051777] IT HAS A LOT OF FRAGMENTS OF CHARCOAL  
 POTTERY AND BONES INTO THE MIDDLE OF THE  
 LAYER. IT COULD BE HAPPENED DURING THE PHASE  
 OF ABANDONMENT OF THE AREA AND IT IS CONNECTED  
 WITH SOME ACTIVITIES IN THIS AREA.  
 THE POTTERY IS FINE (MIDDLE IRON AGE MAYBE) AND  
 THE LAYER COVERS TWO OTHERS DELIBERATE BACKFILLS  
 ON THE SIDES (EASTERN AND WESTERN PART - SEE  
 THE D. 5364) (051770) (051772) AND ANOTHER  
 IN THE MIDDLE (051771).  
 FOR THE POTTERY WE HAVE TWO DIFFERENT  
 TYPOLOGIES (SEE THE SKETCH PLAN).

# SKETCH PLANTS

Refer to context

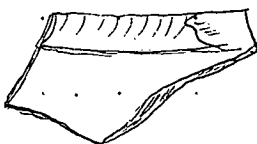
[051777]

SKETCHES

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

POTTERY  
 MIDDLE IRON AGE

I° TYPOLOGY



SECTION



II° TYPOLOGY



SECTION



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                          |                            |                                   |                                                                                                                        |
|--------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>2</b>       | Context number<br><b>(051770)</b>                                                                                      |
| ECB #                    | Subgroup                   | Parent context<br><b>[051777]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |  |
|--|--|-----------------|--|--|-----------------|--|
|  |  | <b>(051769)</b> |  |  | Same as context |  |
|  |  | <b>(051770)</b> |  |  | Cuts context    |  |
|  |  | <b>051773</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"/> |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               | <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>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 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>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 (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 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 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 checked="" 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 checked="" type="checkbox"/><br>gravelly <input checked="" 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 type="checkbox"/></p> <p>dumped layer <input type="checkbox"/></p> <p>deliberate backfill <input checked="" 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><br><b>0,023m</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

construction ☐ use ☐ disuse ☒

|            |           |                    |                                                                                                                                                      |
|------------|-----------|--------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos          | Drawing nos                                                                                                                                          |
|            |           | 0501452<br>0501457 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D5366; D5367<br>(SHEET 30) |

|            |         |
|------------|---------|
| Date       | 26/9/14 |
| Initials   | V.D.    |
| Checked by | HH      |

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 CONTEXT IS A DELIBERATE BACKFILL ON THE  
EASTERN PART OF THE DITCH - ALONG THE SIDE.  
IT HAS FRAGMENTS OF BONES AND CHARCOAL MIXED  
WITH GRAVEL AND WHITE CHALK.  
IT COULD BE HAPPENED DURING THE PHASE OF ABANDONMENT  
OF THE AREA AND IT COULD BE CONNECTED  
WITH SOME ACTIVITIES.

Refer to context

[051444]

## 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 context.



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                          |                            |                                   |                                                                                                                        |
|--------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench                   | Context number<br><b>051471</b>                                                                                        |
| ECB #                    | Subgroup                   | Parent context<br><b>[051472]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(051469)</b> |  |  | Same as context |
|  |  | <b>(051471)</b> |  |  | Cuts context    |
|  |  | <b>(051473)</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 checked="" 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<br>Length: <input type="text"/> Width: <input type="text"/> Depth: <input type="text"/> Diameter: <input type="text"/> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <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</b><br><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                                                                                                                            |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## 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 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 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 checked="" 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>0.20 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                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency<br><b>O H</b>                                                                                                                                                               | bulk find<br><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"/>                                                       | 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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency<br><b>O H</b>                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

## Basic process

construction ☐ use ☐ disuse ☒

|                         |                        |                                                      |                                                                                                                                                                            |
|-------------------------|------------------------|------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos.<br><b>/</b> | Finds nos.<br><b>/</b> | Photo nos.<br><b>0501452-0501454-0501458-0501460</b> | Drawing nos.<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D 5366; D 5367 (SHEET 30)</b> |
|-------------------------|------------------------|------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Date **26/9/11**

Initials **R.D.**

Checked by **HH**

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

0501461

# ADDITIONAL INFORMATION

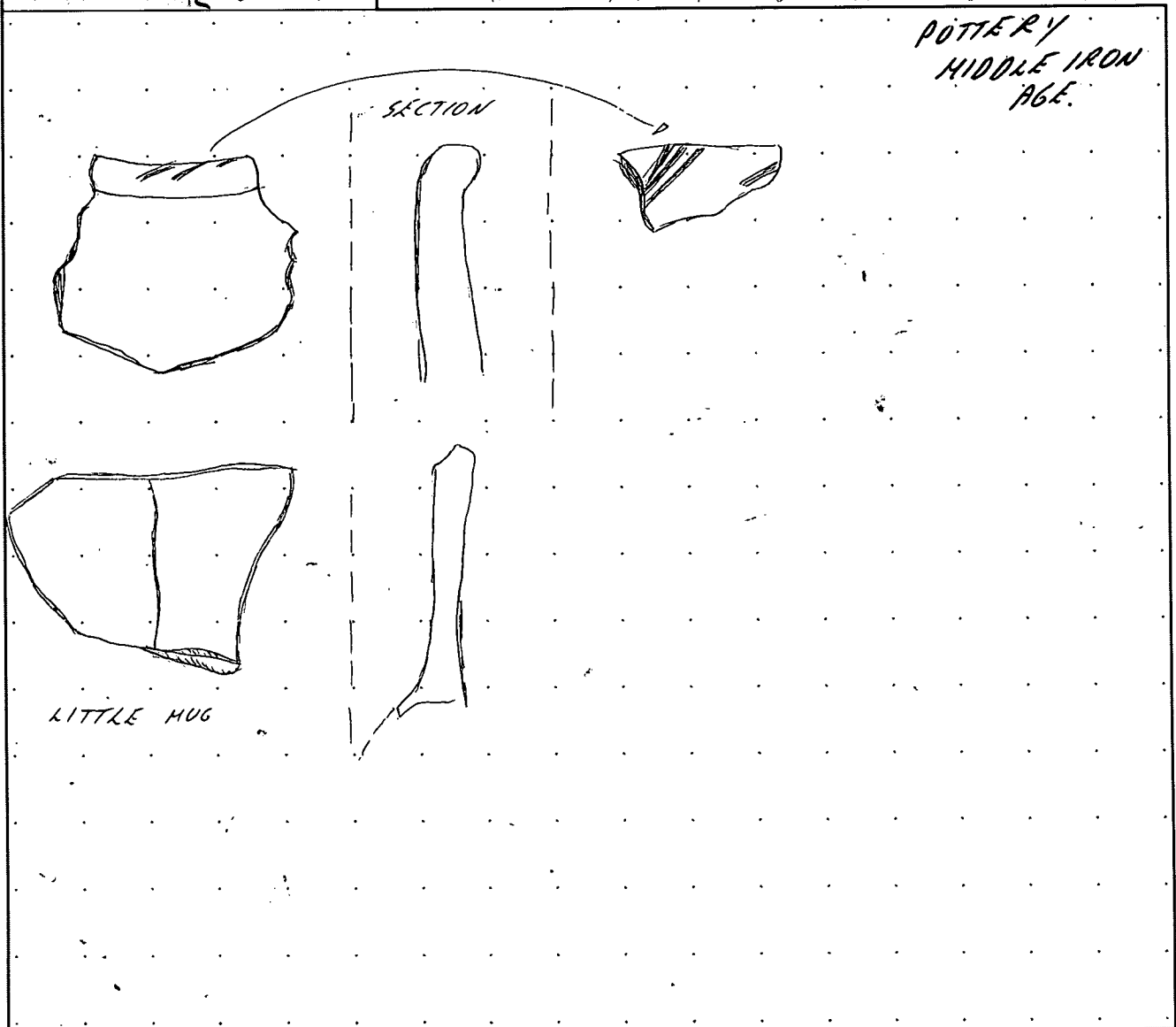
(any further details that may be important for understanding the context, including items marked \* overleaf)

THE CONTEXT IS A DELIBERATE BACK FILL WITH A LOT OF FRAGMENTS OF POTTERY, CHARCOAL AND BONES. IT COULD BE HAPPENED DURING THE PHASE OF DESUSE OF THE AREA OR ABANDONMENT. THE POTTERY COULD BE OF THE MIDDLE IRON AGE (SEE THE SKETCH) AND MAYBE COOKING POTTERY. IN THE SECTION THERE ARE ALSO ANOTHER INTERESTING FRAGMENTS: A PART OF A LITTLE HUG. (SEE THE SKETCH) AND A FRAGMENT OF DAUB (BUILDING MATERIAL MADE WITH FIRED CLAY). THE LAYER IS BEEN INDIVIDUATED IN THE CENTRE OF THE SECTION AND IT COVERS ANOTHER LAYER (051443).

## SKETCH PLANNINGS

Refer to context [051443]

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>TEA 5</b> | Sub area/Trench<br><b>2</b>       | Context number<br><b>(051472)</b>                                                                                      |
| ECB #                    | Subgroup                   | Parent context<br><b>[051477]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  |                 |  |  | Same as context |
|  |  | <b>(051472)</b> |  |  | Cuts context    |
|  |  | <b>(051474)</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><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 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 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"/><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 checked="" type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input checked="" 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 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>                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency <b>H F</b>                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| bulk find                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

### Basic process

|            |           |                                     |                                                                                                                                                                                   |                                                                                                                                                                                       |
|------------|-----------|-------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos<br><b>0501452-0501454</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>05366; 05367</b><br><b>(SHEET 30)</b> | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/><br>Date <b>26/9/14</b><br>Initials <b>V. D.</b><br>Checked by <b>HM</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)

THE CONTEXT IS A DELIBERATE BACK FILL DURING  
THE PHASE OF ABANDONMENT OF THE AREA.  
IT IS BEEN INDIVIDUATED IN THE SOUTH FACING  
SECTION IN THE WESTERN PART AND  
ALONG THE SIDE.

Refer to context

[051477]

## SKETCHES

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

## STRATIGRAPHY

|  |  |          |  |  |                 |  |
|--|--|----------|--|--|-----------------|--|
|  |  | (051471) |  |  | Same as context |  |
|  |  | (051473) |  |  | Cuts context    |  |
|  |  | (051475) |  |  | 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><br><input type="checkbox"/> 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"/>                                       |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                 |

(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"/> | <input type="checkbox"/> clayey <input checked="" type="checkbox"/> clay                      | <input type="checkbox"/> silty <input type="checkbox"/> silt             | <input type="checkbox"/> sandy <input checked="" type="checkbox"/> sand | <input type="checkbox"/> gravelly <input type="checkbox"/> gravel |
| <input checked="" type="checkbox"/> moderately compact            | <input type="checkbox"/> loose                                                                                                        | <input type="checkbox"/> brownish <input checked="" type="checkbox"/> brown                   | <input type="checkbox"/> greyish <input type="checkbox"/> grey           | <input type="checkbox"/> peaty <input type="checkbox"/> peat            |                                                                   |
| <input type="checkbox"/> friable                                  | <input type="checkbox"/> orangeish <input type="checkbox"/> orange                                                                    | <input type="checkbox"/> yellowish <input type="checkbox"/> yellow                            | <input type="checkbox"/> reddish <input checked="" type="checkbox"/> red |                                                                         |                                                                   |
|                                                                   | <input type="checkbox"/> blueish <input type="checkbox"/> blue                                                                        |                                                                                               |                                                                          |                                                                         |                                                                   |
| Thickness                                                         |                                                                                                                                       | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> |                                                                          | other* <input type="checkbox"/>                                         |                                                                   |
| 0.40 m                                                            |                                                                                                                                       |                                                                                               |                                                                          |                                                                         |                                                                   |
| 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                                                         | K                                                                                                                                     |                                                                                               |                                                                          |                                                                         |                                                                   |
| bulk find                                                         | <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 checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|------------|-----------|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| /          | /         | 0501452-<br>0501454 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 5366; D 5364<br>(SHEET 30) | Date 26/9/14<br>Initials V.O.<br>Checked by HH                                                                           |

# ADDITIONAL INFORMATION

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

THE CONTEXT IS A DELIBERATE BACK FILL  
DURING THE PHASE OF ABANDONMENT OF  
THE AREA. IT HAS INTO THE MIDDLE OF  
COMPOSITION SOME PATCHES OF RED CLAY.  
THE THICKNESS (0.40 m) IS BEEN INDIVIDUATED  
IN THE SOUTH FACING SECTION ALONG THE EASTERN  
SIDE.

Refer to context

[051777]

## 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                                                                              |
| A 14      | TEA 5      | 2               | (051774)                                                                                    |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                |
|           |            | 5 051774        | cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (051471) |  |  | Same as context |
|  |  | (051474) |  |  | Cuts context    |
|  |  | (051475) |  |  | 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><br><input type="checkbox"/> 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"/>                                       |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                 |

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

## INTERPRETATION

[illegible]

### Basic process

| Sample nos | Findings nos | Photo nos          | Drawing nos                                                                                                                                            |
|------------|--------------|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| /          | /            | 0501452<br>0501457 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 5366; D 5367<br>(SHEET 30) |

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 LAYER IS A DELIBERATE BACK FILL WITH  
SOME BONES AND A DARK BLACK COLOUR.  
IN FACT INTO THE MIDDLE THERE ARE SOME FRAGMENTS  
OF CHARCOAL AND MAY BE IT COULD BE FOR  
THE COMPOSITION OF ORGANIC MATERIAL.  
IT COVERS A NATURAL INFILLING (051445).

Refer to context

1051445

## 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>TEA 5</b> | Sub-area/Trench<br><b>A. 2</b>    | Context number<br><b>051445</b>                                                                                        |
| ECB#                     | Subgroup                   | Parent context<br><b>(051444)</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(051444)</b> |  |  | Same as context |
|  |  | <b>(051445)</b> |  |  | Cuts context    |
|  |  | <b>(051446)</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>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 <input type="checkbox"/>                                                                                                 |  | <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>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 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 type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input checked="" 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 checked="" 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>0.0404</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

construction ☐ use ☐ disuse ☒

|            |           |                     |                                                                                                                                                        |
|------------|-----------|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos           | Drawing nos                                                                                                                                            |
|            |           | 0501452-<br>0501454 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 5366; D 5364<br>(SHEET 30) |

|            |         |
|------------|---------|
| Date       | 26/9/14 |
| Initials   | V.P.    |
| Checked by | HM      |

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)

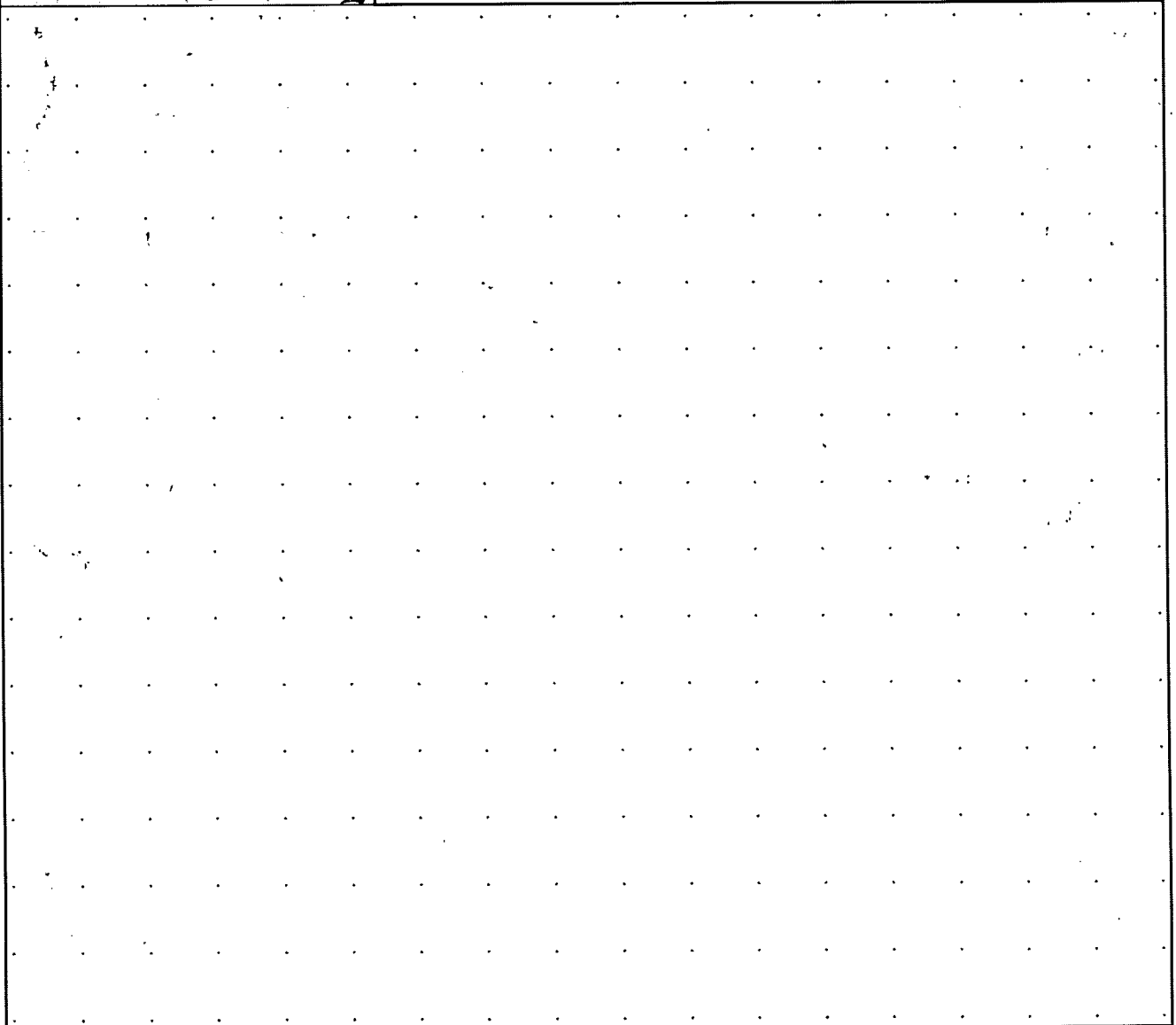
THE CONTEXT IS A NATURAL INFILLING OF A DITCH WITH A LOT OF GRAVEL, MANGANESE INCLUSIONS AND WHITE CHALK. IT COVERS A SLUMP IN THE WESTERN PART OF THE SIDE (SEE THE SOUTH FACING SECTION OF THE DITCH). THERE ARE ALSO SOME BAGS OF CLAY (GRAY CLAY). IT COVERS THE BOTTOM OF THE DITCH AND A SLUMP (051776)

Refer to context

[051776]

## 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      | 2               | 051476                                                                                                 |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [051477]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |                 |  |
|--|--|----------|--|-----------------|--|
|  |  | (051475) |  | Same as context |  |
|  |  | 051476   |  | Cuts context    |  |
|  |  | [051477] |  | 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 <input type="checkbox"/>                                                                                                 |  | <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>U <input type="checkbox"/> flat<br>U <input type="checkbox"/> concave<br>U <input type="checkbox"/> v-shaped<br>U <input type="checkbox"/> sloping<br>U <input type="checkbox"/> uneven<br>U <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b><br>                                                                                                                                                                                                                                                                           |  | <b>Width</b><br>                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <b>Depth</b><br>                                                                                                                                                                                                                                                                             |  | <b>Diameter</b><br>                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <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 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 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 checked="" type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input checked="" 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>0.12m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | 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"/> 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"/> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency <input type="checkbox"/> bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

## Basic process

|            |           |                     |                                                                                                                                                      |                                                                                                                          |
|------------|-----------|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos           | Drawing nos                                                                                                                                          | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|            |           | 0501452-<br>0501457 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D5366; D5367<br>(SHEET 30) | Date 26.9.14<br>Initials R.D.<br>Checked by H.H.                                                                         |

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 LAYER IS A SLUMP ALONG THE WESTERN  
SIDE OF THE DITCH. IT COULD BE HAPPENED  
DURING THE PHASE OF ~~DEPOSITION~~ OF THE  
DITCH.

Refer to context

[OS1444]

## SKETCHES

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

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (051776) |  |  | Same as context |
|  |  | (051777) |  |  | Cuts context    |
|  |  | (051362) |  |  | 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 checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                              |                                                                                                                                                                                                                                                                                                        |                        |                                                                                                                                                                                                                                                          |
| <b>Orientation</b><br>I <input checked="" 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 checked="" 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 checked="" type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>Z <input type="checkbox"/> complex* |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br>1.00 (slot) | <b>Width</b><br>3.20 m                                                                                                                                                                                                                                                                                 | <b>Depth</b><br>0.95 m | <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>FILL / DEPOSIT</b>                                                |                          |                          |                                    |                                 |                                 |                                  |                          |                                   |                                 |                               |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|----------------------------------------------------------------------|--------------------------|--------------------------|------------------------------------|---------------------------------|---------------------------------|----------------------------------|--------------------------|-----------------------------------|---------------------------------|-------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b>                                                    |                          |                          | <b>Colour</b>                      |                                 |                                 |                                  |                          |                                   | <b>Composition</b>              |                               |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <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 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   |                                 |                                  |                          |                                   |                                 |                               |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <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                                                            |                          |                          |                                    |                                 |                                 |                                  |                          |                                   |                                 |                               |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 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"/> |

ropsoil ☐  
 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

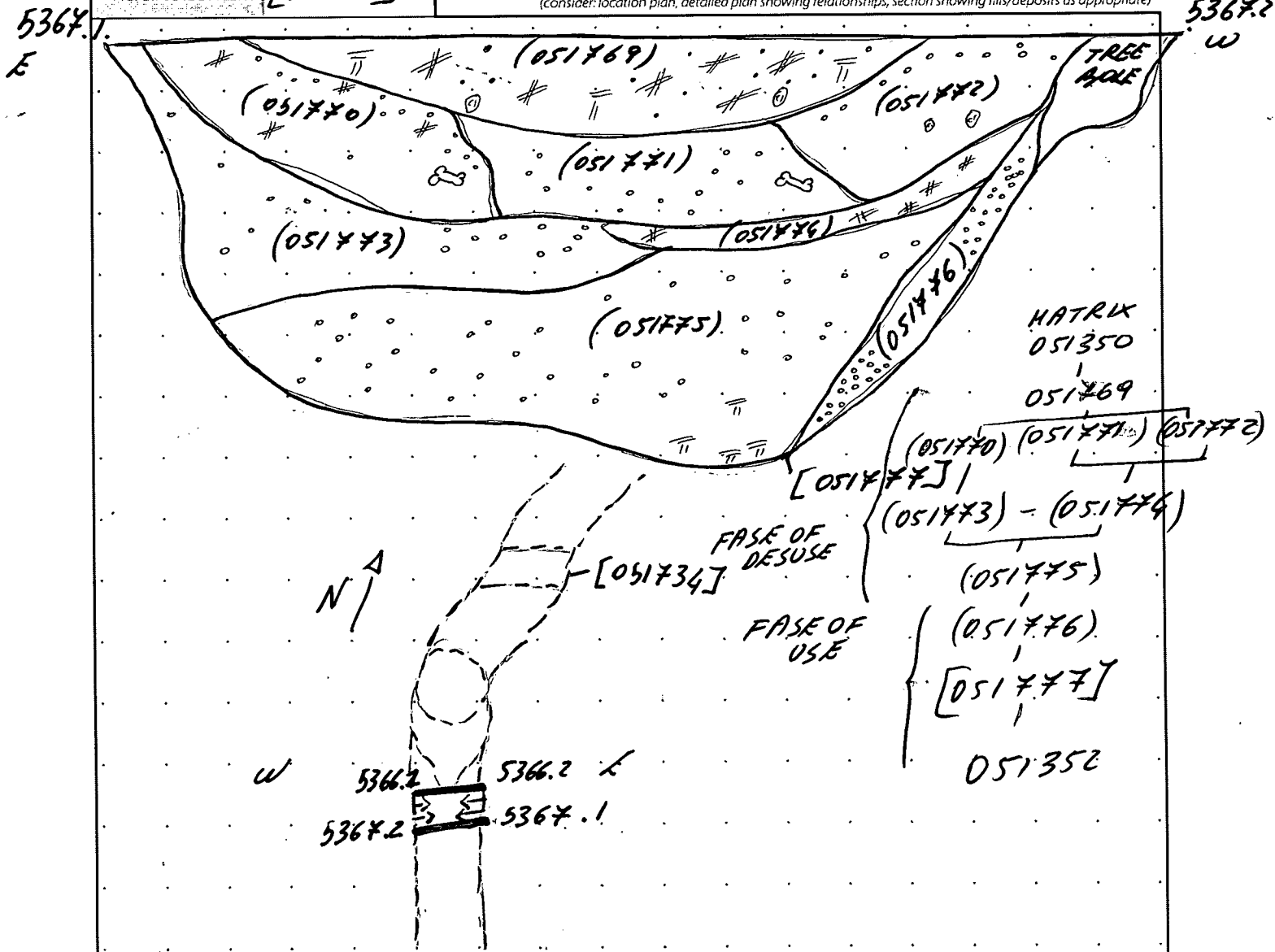
| Sample nos. | Finds nos. | Photo nos.          | Drawing nos.                                                                                                                                          | construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
|-------------|------------|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| /           | /          | 0501452-<br>0501454 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 53661 D5367<br>(SHEET 30) | Date 26/9/11<br>Initials V. D.<br>Checked by HH                                                               |

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

THE CONTEXT IS A CUT OF A DITCH WITH MODERATE  
SLOPING SIDES AND THE BOTTOM CONCAVE.  
IT HAS TWO NATURAL INFILLING (051775)  
(051776) AND SIX DELIBERATE BACK FILLS  
(051769) (051770) (051771) (051772) (051773) (051774).  
IT HAS NORTH - SOUTH DIRECTION.

## 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>2</b>       | Context number<br><b>(051778)</b>                                                                                      |
| ECB.#<br><b>-</b>       | Subgroup<br><b>-</b>       | Parent context<br><b>[051719]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |          |
|--|--|-----------------|--|--|-----------------|----------|
|  |  | <b>(051720)</b> |  |  | Same as context | <b>-</b> |
|  |  | <b>(051778)</b> |  |  | Cuts context    | <b>-</b> |
|  |  | <b>[051719]</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 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 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 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"/> |  | <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) |
| <b>Thickness</b><br>0.30                                                                                                                                                              |   | 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 | F                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| bulk find                                                                                                                                                                             |   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

### Basic process

|            |           |           |                                                                                                                                      |
|------------|-----------|-----------|--------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos | Drawing nos                                                                                                                          |
|            |           | 0501497/8 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>DW# D05376 |

|                                       |                                         |                                 |
|---------------------------------------|-----------------------------------------|---------------------------------|
| construction <input type="checkbox"/> | use <input checked="" type="checkbox"/> | disuse <input type="checkbox"/> |
| Date                                  | 26/09/17                                |                                 |
| Initials                              | J.M.S.A.                                |                                 |
| Checked by                            | MH                                      |                                 |

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 (051778) IS THE BOTTOM FILL OF A DITCH.

THE COMPOSITION, MIXED COLOURS AND TEXTURES ADDED TO THE LACK OF ARCHAEOLOGICAL EVIDENCES SUGGEST THAT THIS FILL WAS FORMED WITH THE SOIL REMOVED TO DIG THE DITCH AND WAS THROWN AGAIN INTO TO HOLD THE POSTS / STAKES PUT INTO THE DITCH. THAT THEORY EXPLAIN THE MIXED MATERIALS AND THE IRREGULAR SHAPE, MAYBE CREATED WHEN THE POSTS / STAKES WERE REMOVED.

BASE ON THE MATERIALS RECOVERED IN THE TOP FILL PROBABLY IT IS POSSIBLE TO DATE THIS FILL DURING THE IRON AGE OR IMMEDIATELY BEFORE.

Refer to context [051779]

## 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>AM</b> | Area/Field<br><b>TEA05</b> | Sub area/Trench<br><b>2</b>       | Context number<br><b>[051779]</b>                                                                                      |
| ECB #<br><b>-</b>      | Subgroup<br><b>-</b>       | Parent context<br><b>[051779]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |              |  |  |                 |  |
|--|--|--------------|--|--|-----------------|--|
|  |  | (051780)     |  |  | Same as context |  |
|  |  | [051779]     |  |  | Cuts context    |  |
|  |  | (051352) nat |  |  | 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 type="checkbox"/> linear <input 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 checked="" 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<br><br>N                                                                                                                                         | <b>Sides</b><br><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* | <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* NOT REACHED OR FULLY EXCAVATED |                             |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     | <b>Length</b><br><b>740</b>                                                                                                                                                                                                                                                                      | <b>Width</b><br><b>743</b>                                                                                                                                                                                                                                       | <b>Depth</b><br><b>0.61</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"/><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>                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| frequency                                                                                                                                                                  | 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"/> |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| bulk find                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |

### CROSS-REFERENCE

### Basic process

construction ☒ use ☐ disuse ☐

|            |           |           |                                                                                                                                     |
|------------|-----------|-----------|-------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos | Drawing nos                                                                                                                         |
|            |           | 0501497/8 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>DW#205370 |

Date **26/09/17**

Initials **J.M.S.A**

Checked by **HM**

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)

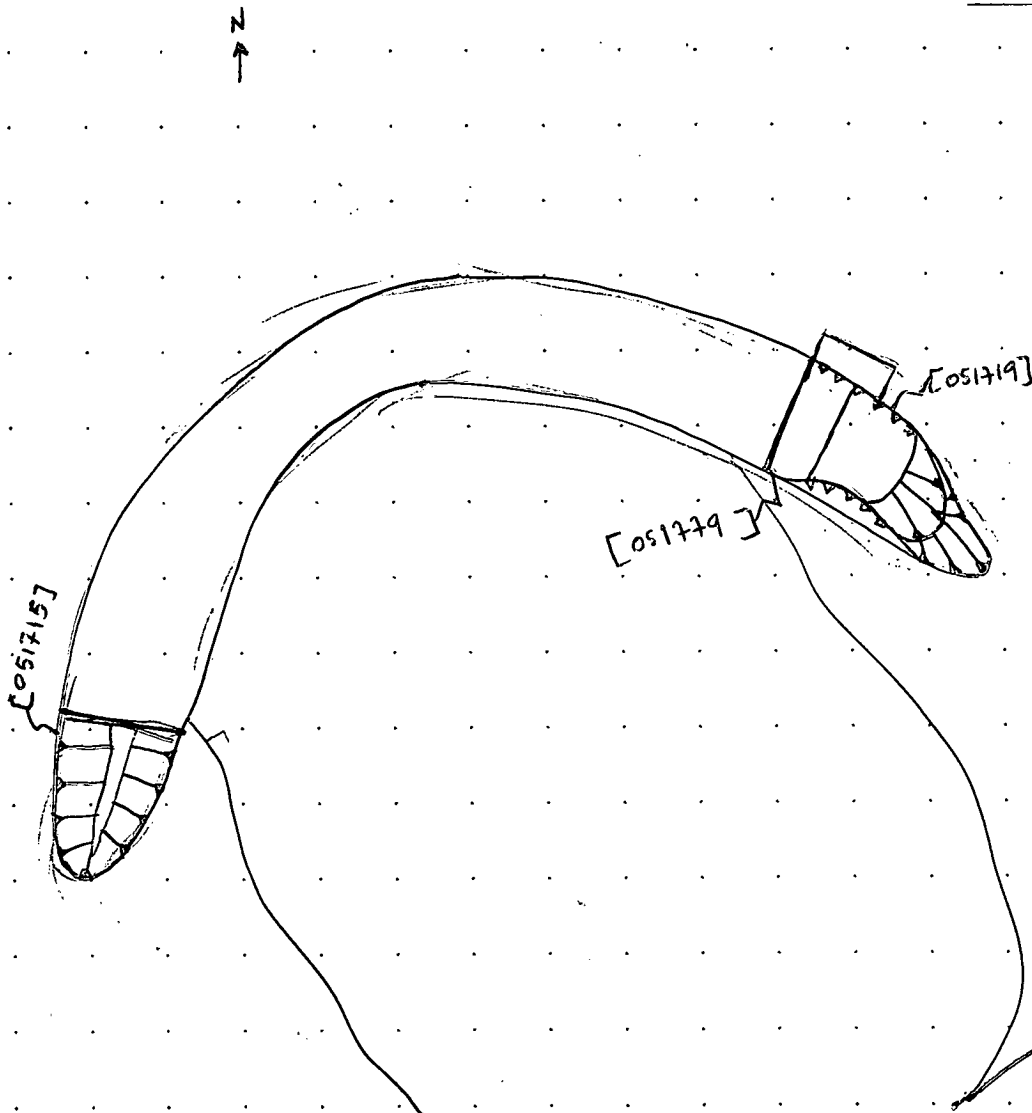
THIS CONTEXT [051779] IS THE CUT OF A UNKNOWN FEATURE. IT IS UNKNOWN, FOR THE MOMENT, BECAUSE AT THE BEGINNING THIS SLOT WAS MADE ONLY TO UNDERSTAND THE SMALL SEMI-CIRCULAR DITCH TERMINUS. HOWEVER, IN THE SOUTH SIDE OF THIS TERMINUS APPEARED THIS NEW CUT / RELATED PROBABLY WITH THE BIG FEATURE IN THE MIDDLE OF THE "CIRCLE" SURROUNDED BY THE DITCH [051715] & [051719]. THE LACK OF MATERIALS WITH ARCHAEOLOGICAL NATURE DOESN'T ALLOW TO DATE THIS CUT OR REVEALS THE FUNCTION WHICH SERVED. WE ARE GOING TO OPEN TWO NEW SLOTS OF RELATIONSHIP BETWEEN BOTH FEATURES TO CLARIFY THE NATURE OF THIS CUT.

Refer to context

SECTION IN (051730)

## 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      | 2               | (051780)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
| -         | -          | [051779]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (051781) |  |  | Same as context | - |
|  |  | (051780) |  |  | Cuts context    | - |
|  |  | [051779] |  |  | 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 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 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"/> |                          | clayey <input 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 checked="" type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                          |
| Thickness                                                                                                                                                        |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                          |                          |
| 035                                                                                                                                                              |                          | 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                                                                                                                                                        | f                        | f                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                          |                          |
| bulk find                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                 | <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) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### CROSS REFERENCE

### Basic process

construction ☐ use ☒ disuse ☐

|            |           |           |                                                                                                                                      |
|------------|-----------|-----------|--------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos | Drawing nos                                                                                                                          |
|            |           | 050497/8  | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>DW# D05370 |

|            |          |
|------------|----------|
| Date       | 26/09/17 |
| Initials   | J.M.S.A. |
| Checked by |          |

# ADDITIONAL INFORMATION

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

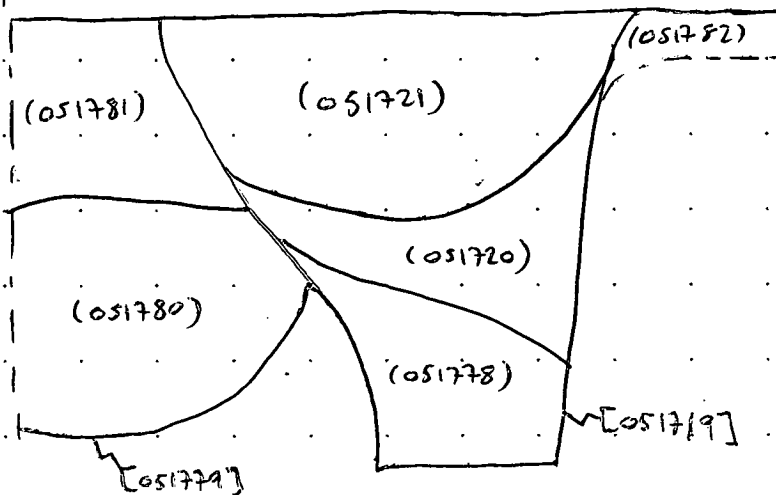
THIS CONTEXT (051780) IS THE FILL OF A FEATURE [051779].  
 BASE ON THE COMPOSITION AND THE LACK OF ARCHAEOLOGICAL EVIDENCES LOOKS  
 LIKE A NATURAL INFILLING MADE BY A PROCESS RELATED WITH  
 WATER DUE TO THE HIGH CONCENTRATIONS OF CHALK AND GRAVELS.  
 FOR THE MOMENT IT IS NOT POSSIBLE TO DATE THIS FILL OR SPECIFY  
 ITS NATURE.

Refer to context [051779]

## SKETCHES

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

NE. FACING SECTION



MATRIX

(051351) subs.

(051721)

(051720)

(051778)

[051719]

(051781)

(051782)

(051780)

[051779]

(051352) nat.

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA05      | 2               | (051781)                                                                                               |
| ECB#      | Subgroup   | Parent context  | Context type                                                                                           |
| -         | -          | [051779]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |          |
|--|--|----------|--|--|-----------------|----------|
|  |  | [051719] |  |  | Same as context | <        |
|  |  | (051781) |  |  | Cuts context    | -        |
|  |  | (051780) |  |  | Cut by context  | [051719] |

### 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 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 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 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>0.20                                                                                                                                                              |                          | 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

construction ☐ use ☐ disuse ☒

|            |           |           |                                                                                                                                       |
|------------|-----------|-----------|---------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos | Drawing nos                                                                                                                           |
|            |           | 0501497/8 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>DW # D05370 |

|            |          |
|------------|----------|
| Date       | 26/09/17 |
| Initials   | J.M.S.A. |
| Checked by | HM       |

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 (051781) IS THE TOP FILL OF A UNKNOWN FEATURE. [051779].  
 BASE ON THE COMPOSITION AND THE LACK OF ARCHAEOLOGICAL EVIDENCES  
 IT SEEMS IT WAS FORMED BY NATURAL INFILLING AND WAS CUT  
 BY THE [051719] TO OPEN A IRON AGE DITCH.  
 FOR THE MOMENT IT IS NOT POSSIBLE TO DATE THIS FILL OR SPECIFY ITS  
 NATURE.

Refer to context [051779]

## 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 of the archaeological context.

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                            |                             |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA05</b> | Sub-area/Trench<br><b>2</b> | Context number<br><b>(051782)</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

|                    |                 |          |
|--------------------|-----------------|----------|
| [051719]           | Same as context | -        |
| (051782) = NATURAL | Cuts context    | -        |
| (051352)           | Cut by context  | [051719] |

### 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**  
**010**  
 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** **0**

**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. | Finds nos. | Photo nos. | Drawing nos.                                                                                                                          |
|             |            | 0501497/8  | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>DW # D05370 |

☒ construction ☐ use ☐ disuse

Date **26/09/17**

Initials **J.N.S.A.**

Checked by **MH**

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 (051782) IS A DEPOSIT PLACED ON THE TOP SIDES OF THE DITCH [051719]. THE COMPOSITION OF THIS SOIL AND THE COLOUR MIX OF NATURAL (051352) AND SOMETHING ELSE SUGGEST A DEPOSIT FORMED BY NATURAL PROCESSES BEFORE THE CREATION OF THE COT [051719] BECAUSE IT IS CUTTING IT.

ETA: ALLUVIUM. - WHICH IS THICK + PATCHY ACROSS THE SITE

Refer to context [051779]

## 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 | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEAS       | 2               | [051783]                                                                                               |
| ECB#      | Subgroup   | Parent context  | Context type                                                                                           |
| —         | —          | [051783]        | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |         |  |                 |   |
|--|--|----------|---------|--|-----------------|---|
|  |  | (051784) |         |  | Same as context | — |
|  |  | [051783] |         |  | Cuts context    | — |
|  |  | (051352) | NATURAL |  | 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 checked="" 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                                                                                                                                  | <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 type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input checked="" type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |       |          |
| Dimensions                                                                                                                                                                                                                                                                              | Length                                                                                                                                                                                                                                                                   | Width                                                                                                                                                                                                                         | Depth | Diameter |
| in metres                                                                                                                                                                                                                                                                               | >1.50                                                                                                                                                                                                                                                                    | 1.40                                                                                                                                                                                                                          | 0.45  | —        |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |       |          |
| design <input checked="" type="checkbox"/> material cut into <input checked="" type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input checked="" type="checkbox"/> uncertain <input type="checkbox"/>                                                 |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |       |          |

- Possible 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                                                                                                                                            | 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"/> | 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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                    |  |
| 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                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                    |  |

- 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                                                                                                                      |
| —          | —         | 0501485<br>0501486<br>0501493 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05331 |

## Basic process

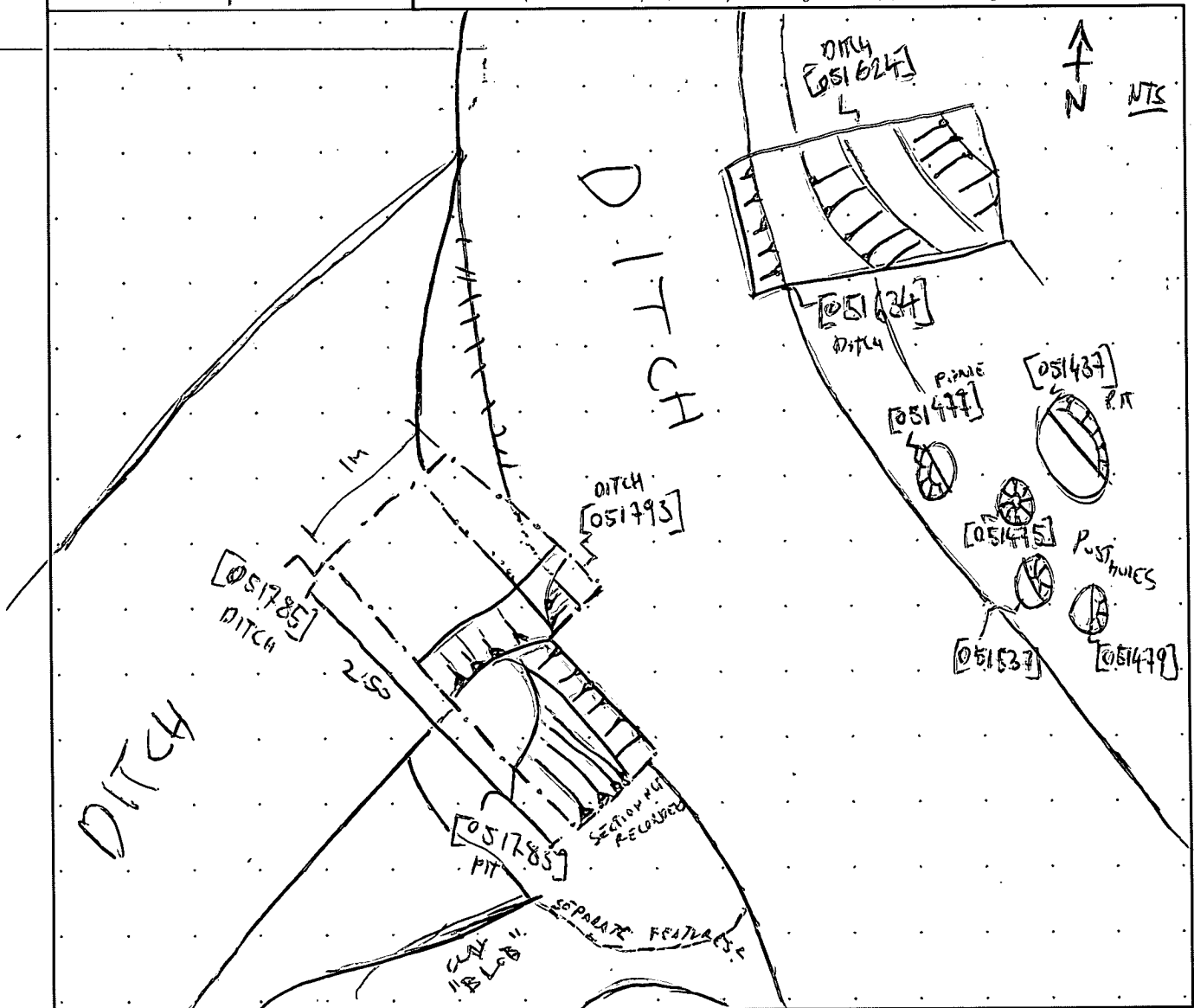
|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date 26/01/17                                                                                                 |
| Initials M4                                                                                                   |
| Checked by JH                                                                                                 |

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

THIS CWT IS THE EARLIEST RECORDED FEATURE IN THIS SLOT, FOLLOWED BY NITUA [U51785]  
AND NITUA ~~5179~~ [U51793].

Refer to context

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





## The MOLA logo features a stylized, abstract pattern of black and white lines forming a grid-like structure, with the word 'MOLA' in bold, black, sans-serif capital letters below it. The HEADLAND Archaeology logo features a stylized, abstract pattern of black and white lines forming a grid-like structure, with the words 'HEADLAND' and 'ARCHAEOLOGY' in bold, black, sans-serif capital letters below it.

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub_area/Trench | Context number                                                                                         |
| A14       | TEA.5      | 2               | (051784)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
| —         | —          | [051783]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |          |
|--|--|----------|--|--|-----------------|----------|
|  |  | [051785] |  |  | Same as context | -        |
|  |  | (051784) |  |  | Cuts context    | -        |
|  |  | [051783] |  |  | Cut by context  | [051785] |

(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><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> </div> <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>          |               | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <br/> <br/> <br/> <br/> <br/> <br/> </div> <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> <div style="margin-left: 10px;">           sloping         </div> </div> |              | <b>Base</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <br/> <br/> <br/> <br/> <br/> </div> <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> </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"/>                                      |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |              |                                                                                                                                                                                                                                                                                                                                                                                                  |

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

## INTERPRETATION

| Compaction                                                        |                          | Colour                                                                                        |                                                | Composition                              |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |
|-------------------------------------------------------------------|--------------------------|-----------------------------------------------------------------------------------------------|------------------------------------------------|------------------------------------------|----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|
| <input checked="" type="checkbox"/> compact                       |                          | light <input type="checkbox"/>                                                                | mid <input checked="" type="checkbox"/>        | dark <input type="checkbox"/>            | mottled <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |
| <input type="checkbox"/> moderately compact                       |                          | brownish <input checked="" type="checkbox"/>                                                  | <del>grey</del> brown <input type="checkbox"/> | <input checked="" type="checkbox"/> grey |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |
| <input type="checkbox"/> loose                                    |                          | orangeish <input type="checkbox"/>                                                            | <input type="checkbox"/> orange                |                                          |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |
| <input type="checkbox"/> friable                                  |                          | yellowish <input type="checkbox"/>                                                            | <input type="checkbox"/> yellow                |                                          |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |
|                                                                   |                          | reddish <input type="checkbox"/>                                                              | <input type="checkbox"/> red                   |                                          |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |
|                                                                   |                          | blueish <input type="checkbox"/>                                                              | <input type="checkbox"/> blue                  |                                          |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |
| <b>Thickness</b>                                                  |                          |                                                                                               |                                                |                                          |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |
| 0.45                                                              |                          | 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 / WBP         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             | No Finds                            |
| frequency                                                         | O                        | O                                                                                             | F                                              |                                          | 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 type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

### Basic process

| Sample nos | Finds nos | Photo nos                     | Drawing nos                                                                                                                      | <input type="checkbox"/> construction <input type="checkbox"/> use <input type="checkbox"/> discard <input checked="" type="checkbox"/> |
|------------|-----------|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| /          | /         | 0501485<br>0501486<br>0501493 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>050371 | Date 26/09/17<br>Initials MG<br>Checked by HM                                                                                           |

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)

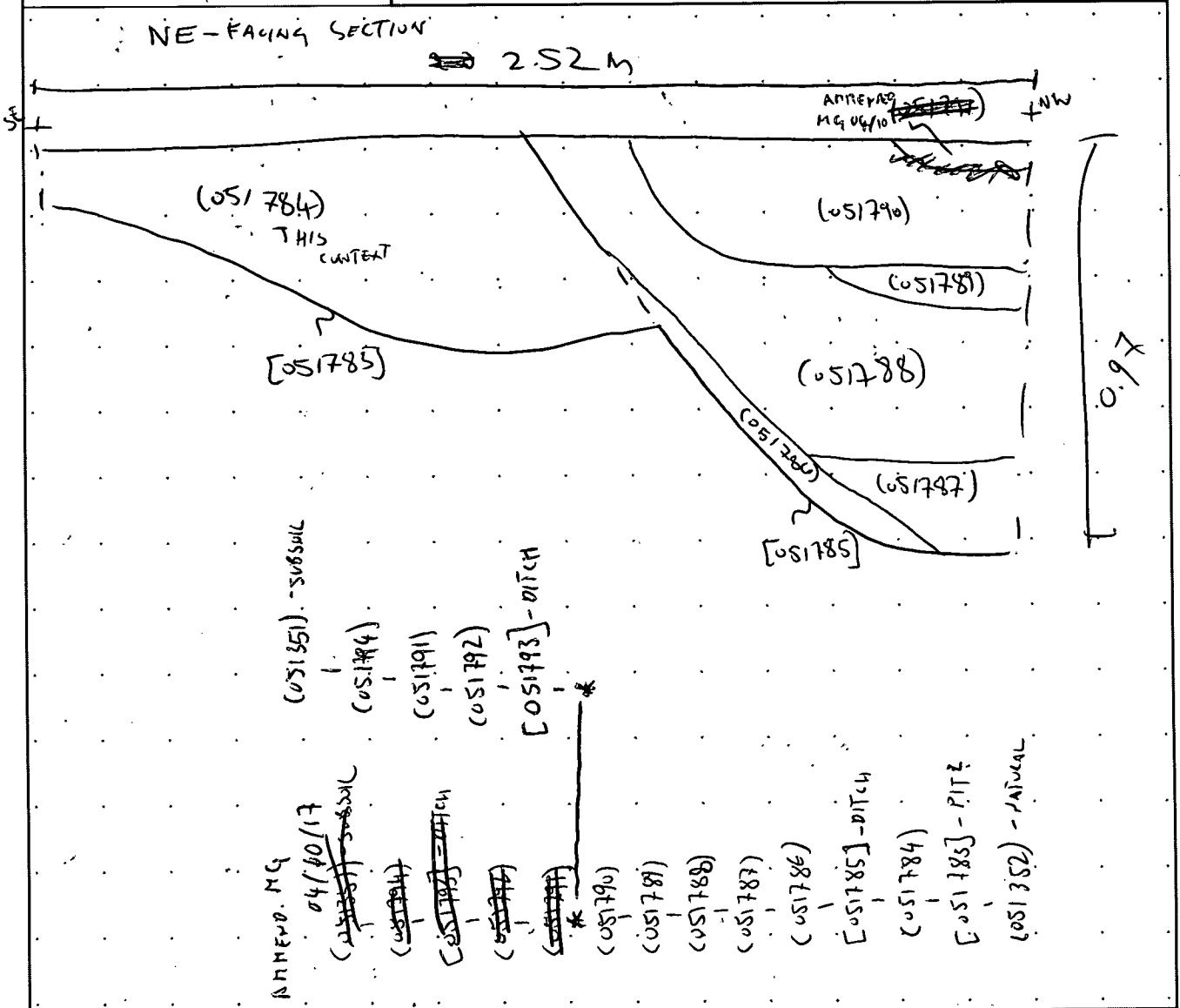
THE ONLY FILL OF POSSIBLE PIT [051783]. FILL, BRANNISH GREY CLAY IS GRADUALLY CHANGING ~~FROM~~ <sup>FROM</sup> LIGHTER TO DARKER MOVING SE-NW, SHALLOWEST TO DEEPEST POINT. SHORE

FILL INCLUDED NO FINDS, BUT CONTAINED CHARCOAL AND FIRED CLAY PARTICLES.

## SKETCHES

Refer to context

(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      | 2               | [051785]                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
| -         | -          | [051785]        | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |          |
|--|--|----------|--|--|-----------------|----------|
|  |  | (051786) |  |  | Same as context | -        |
|  |  | [051785] |  |  | Cuts context    | (051784) |
|  |  | (051784) |  |  | Cut by context  | -        |

## CUT

(if you are using this section score but 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 checked="" type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |       |          |
| Orientation                                                                                                                                                                                                                                                                                        | Sides                                                                                                                                                                                                                                                                    | Base                                                                                                                                                                                                                          |       |          |
| I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>✓ <input checked="" type="checkbox"/> NE-SW<br>✓ <input 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 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 | Diameter |
| in metres                                                                                                                                                                                                                                                                                          | 7.14                                                                                                                                                                                                                                                                     | 71.30                                                                                                                                                                                                                         | 0.95  | -        |
| 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 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>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"/> |                |
| Thickness                                                                                                                                             | Inclusions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                    |                |
|                                                                                                                                                       | use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                    |                |
| frequency                                                                                                                                             | stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | chalk                                                                                                                                                                                                                                                                                                                              | iron pan       |
| bulk find                                                                                                                                             | manganese                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | charcoal                                                                                                                                                                                                                                                                                                                           | plant remains* |
|                                                                                                                                                       | wood                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | marine shell                                                                                                                                                                                                                                                                                                                       | bone*          |
|                                                                                                                                                       | pot                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | fired clay / CBM                                                                                                                                                                                                                                                                                                                   | CTP            |
|                                                                                                                                                       | mortar/plaster                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | leather/textile                                                                                                                                                                                                                                                                                                                    | glass          |
|                                                                                                                                                       | metal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | industrial waste                                                                                                                                                                                                                                                                                                                   | lithics        |
|                                                                                                                                                       | coarse stone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                    |                |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <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

|            |           |                                                                                                                        |             |
|------------|-----------|------------------------------------------------------------------------------------------------------------------------|-------------|
| Sample nos | Finds nos | Photo nos                                                                                                              | Drawing nos |
| /          | /         | 0501485 to 0501490<br>AND<br>0501493                                                                                   | 005371      |
|            |           | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |             |

|                                                  |                                                              |
|--------------------------------------------------|--------------------------------------------------------------|
| Basic process                                    |                                                              |
| construction <input checked="" type="checkbox"/> | use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date                                             | 26/9/17                                                      |
| Initials                                         | ng                                                           |
| Checked by                                       | HH                                                           |

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)

FEATHER'S FILLS WERE COMPLETELY "STERILE" VOID OF ANY FINDS.

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

FOR PLAN  
SKETCH

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA5</b> | Sub-area/Trench<br><b>2</b>       | Context number<br><b>(051786)</b>                                                                                      |
| ECB #                   | Subgroup<br><b>-</b>      | Parent context<br><b>[051785]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |          |
|--|--|-----------------|--|--|-----------------|----------|
|  |  | <b>(051787)</b> |  |  | Same as context | <b>-</b> |
|  |  | <b>(051786)</b> |  |  | Cuts context    | <b>-</b> |
|  |  | <b>[051785]</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 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 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 checked="" 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"/>                                                                       |                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                               |       |          |

### FILL/DEPOSIT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Compaction                                                                                                                                                       | Colour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Composition                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <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 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"/> | 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 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"/> |
| Thickness                                                                                                                                                        | Inclusions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 0.01                                                                                                                                                             | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency                                                                                                                                                        | stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | chalk                                                                                                                                                                                                                                                                                                                                                    | iron pan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| bulk find                                                                                                                                                        | manganese                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | charcoal                                                                                                                                                                                                                                                                                                                                                 | plant remains*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                  | wood                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | marine shell                                                                                                                                                                                                                                                                                                                                             | bone*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                                                                                                  | pot                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | fired clay / CBM                                                                                                                                                                                                                                                                                                                                         | CTP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                  | mortar/plaster                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | leather/textile                                                                                                                                                                                                                                                                                                                                          | glass                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                                                                                                  | metal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | industrial waste                                                                                                                                                                                                                                                                                                                                         | lithics                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                                                                                                                                                                  | coarse stone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | No finds                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

### Basic process

|                                                                                                               |           |                               |                                                                                                                                  |
|---------------------------------------------------------------------------------------------------------------|-----------|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos                                                                                                    | Finds nos | Photo nos                     | Drawing nos                                                                                                                      |
|                                                                                                               |           | 0501485<br>0501486<br>0501493 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>005371 |
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |           |                               |                                                                                                                                  |
| Date <b>26/09/17</b><br>Initials <b>MG</b><br>Checked by <b>HH</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)

THE WT RUNNING BETWEEN (051784) AND (051786) CAN ONLY BE ESTIMATED BY THE SLOPE'S DIRECTION, HOWEVER.

NOT AUTHORIZED TO BE USED FOR ANY OTHER PURPOSES

Refer to context (051784)

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

FULL NE-FACING  
SECTION



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA 5      | 2               | (051787)                                                                                               |
| ECB#      | Subgroup   | Parent context  | Context type                                                                                           |
| -         | -          | [051785]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (051788) |  |  | Same as context | - |
|  |  | (051787) |  |  | Cuts context    | - |
|  |  | (051786) |  |  | 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 | 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"/>                                                                       |                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                    |       |          |

### FILL/DEPOSIT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                          |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Compaction                                                                                                                                                                  | Colour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Composition                                                                                                                                                                                                                                                                                                                                              |  |
| <input checked="" 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 checked="" 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 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"/> |  |
| Thickness                                                                                                                                                                   | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                          |  |
| 0.14                                                                                                                                                                        | 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<br>No Finds                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                          |  |
| frequency                                                                                                                                                                   | M                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                          |  |
| bulk find                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                          |  |

### CROSS REFERENCE

### Basic process

construction ☐ use ☒ disuse ☐

|            |           |                                |                                                                                                                              |
|------------|-----------|--------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                      | Drawing nos                                                                                                                  |
|            |           | 0501485 to 0501490 and 0501493 | Surveyed: plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>05371 |

|            |         |
|------------|---------|
| Date       | 26/9/12 |
| Initials   | HH      |
| Checked by | HH      |

This form is incomplete if fields marked with \* are empty. PTC 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)

NOTICE (GREYISH) BROWN FILL WITH MODERATE AMOUNT OF GRAVEL. FILL INCLUDES OCCASIONAL "STICKS" OF NATURAL SOIL AND IS BELIEVED TO HAVE SETTLED IN THE DITCH THROUGH THE PERIOD WHEN FEATURE WAS STILL IN USE (OR SHORTLY AFTER ABANDONMENT).

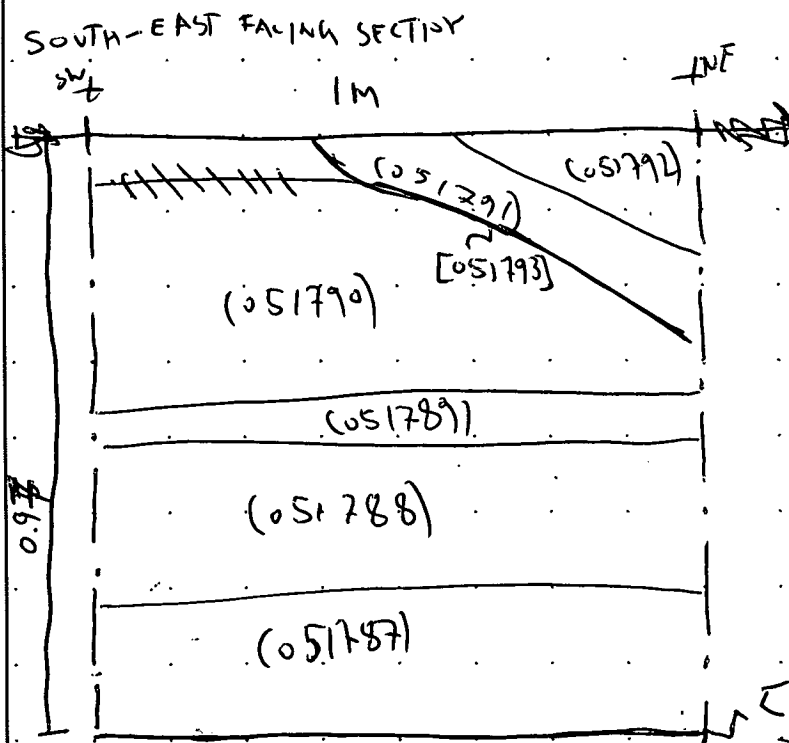
Refer to context

## SKETCHES

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

(051784) FOR NE-FACING SECTION

(051794) FOR SW-FACING SECTION SKETCH



NOTE: SEE (051784) FOR MATRIX

\* SECTION AMENDED 19 04/10/17



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                   |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>2</b>       | Context number<br><b>(051788)</b>                                                                                      |
| ECB #<br><b>-</b>       | Subgroup<br><b>-</b>       | Parent context<br><b>[051785]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |                 |
|--|--|-----------------|--|--|-----------------|-----------------|
|  |  | <b>(051789)</b> |  |  | Same as context | <b>-</b>        |
|  |  | <b>(051788)</b> |  |  | Cuts context    | <b>-</b>        |
|  |  | <b>(051787)</b> |  |  | Cut by context  | <b>[051793]</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><input type="checkbox"/> NA                                                                                                        | <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 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"/><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"/> | <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>0.35</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> <td><b>no finds</b></td> </tr> <tr> <td>frequency</td> <td><b>h</b></td> <td></td> <td></td> <td><b>0</b></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> <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 | <b>no finds</b> | frequency | <b>h</b> |  |  | <b>0</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 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"/> |
| 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>no finds</b>  |         |              |                 |           |          |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>h</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>0</b>                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                  |         |              |                 |           |          |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 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>0501485 to 0501490</b><br><b>and 0501493</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>05371</b> |
|------------------------|-----------------------|--------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☐ disuse ☒

Date **27/09/17**  
 Initials **mg**  
 Checked by **HH**

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

FILL INCLUDED GRAVEL STONES AND AN OCCASSIONAL CHARCOAL PARTICLE, BUT NO ARCHAEOLOGICAL FINDS.

↓ ↓ ↓ ↓ ↓

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

(051787) Fol 26 Facing Section.

(051794) FOR. SW FACING SECTION

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEAS       | 2               | (051789)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
| —         | —          | 051785          | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (051790) |  |  | Same as context | — |
|  |  | (051789) |  |  | Cuts context    | — |
|  |  | (051788) |  |  | 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 checked="" type="checkbox"/> NW-SE                                                                                                                    | <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 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 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 type="checkbox"/> clay <input type="checkbox"/><br>silty <input checked="" 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 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>0.09                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

## Basic process

|            |           |                                         |                                                                                                                                  |
|------------|-----------|-----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                               | Drawing nos                                                                                                                      |
| /          | /         | 0501485 to<br>0501490<br>AND<br>0501495 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>050371 |

|                                                                                                                |
|----------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> discard <input checked="" type="checkbox"/> |
| Date 27/09/17                                                                                                  |
| Initials mg                                                                                                    |
| Checked by MH                                                                                                  |

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

# ADDITIONAL INFORMATION

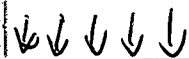
(any further details that may be important for understanding the context, including items marked \* overleaf)

A RATHER SUBTLE (EVEN IF 0.09M THICK) BAY OF SANDY SILT FILL. FILL SETTLED IN THE FENTURE ABOVE FILL (051789) AND BELOW FILL (051790).

IT IS, AT PLACES MIXED WITH THE TWO FILLS, WHICH IS ATTRIBUTED TO THE WEIGHT OF FILL ABOVE IT AND FRIABILITY OF THIS CONTEXT (= IT IS NOT COMPACT & DISTURBY).

## SKETCHES

Refer to context



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

(051784) FOR NE-FACING SECTION

(051787) FOR SE-FACING SECTION

(051794) FOR SW-FACING SECTION

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TFAS       | 2               | (051790)                                                                                               |
| EBW       | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [051795]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |          |
|--|--|----------|--|--|-----------------|----------|
|  |  | (051791) |  |  | Same as context | —        |
|  |  | (051790) |  |  | Cuts context    | —        |
|  |  | (051789) |  |  | Cut by context  | (051793) |

### 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><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><br>                                                                                                                                                                                                                                                                     |  | <b>Width</b><br>                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |
| <b>Depth</b><br>                                                                                                                                                                                                                                                                             |  | <b>Diameter</b><br>                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |
| <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 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"/> |                          | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input checked="" 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"/> |                          | <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 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 checked="" 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><br>0.45                                                                                                                                                              |                                     | 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             | No finds                 |
| 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 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 ☒

Date 27/09/17

Initials MG

Checked by MH

|            |           |                                         |                                                                                                                                  |
|------------|-----------|-----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                               | Drawing nos                                                                                                                      |
| /          | /         | 0501485 70<br>0501490<br>AND<br>0501493 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>705371 |

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")

~~ALONG WITH~~ (051788), THIS IS ANOTHER THICK ~~DEPOSIT~~ FILL INFILLING  
DITCH CUT (051785). - (FILL BEING 0.45 M THICK).

REGARDLESS OF ITS ~~THICKNESS~~ THICKNESS, FILL IS BELIEVED TO HAVE FORMED BY NATURAL INFILLING  
OF THE CUT. IT IS VERY SIMILAR IN TEXTURE AND COLOUR TO (051788).

THIS FILL TOO, INCLUDES GRAVEL STONES AND OCCASIONAL MINOR CHARCOAL SPOTS. NO FINDS  
WERE RETAINED FROM THIS FILL.

Refer to context



## SKETCHES

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

(051784) FOR NF-FACING SECTION SKETCH

(051787) FOR SE ——— || ———

(051794) FOR SW. ——— || ———



STRATIGRAPHIC MATRIX M4 04/10/17 STRATIGRAPHY

|             |  |                   |          |  |                 |   |
|-------------|--|-------------------|----------|--|-----------------|---|
|             |  | (051794)          |          |  | Same as context | — |
| ANNEVO.     |  | (051791)          |          |  | Cuts context    | — |
| MC 04/10/17 |  | <del>051794</del> | (051792) |  | 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><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>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"/>                                       |  | other cut (describe below)                                                                                                                                                                                                                                                    |              |                                                                                                                                                                                                                                   |

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

DESCRIPTION

## INTERPRETATION

[illegible]

### CROSS REFERENCE

| Sample nos                                                                          | Finds nos                                                                           | Photo nos                               | Drawing nos                                                                                                                      |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
|  |  | 0501485<br>To<br>0501490<br>AND 0501493 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>005371 |

### Basic process

construction ☐ use ☐ disuse ☒

Date 27/09/17

Initials mg

Checked by HH



# ADDITIONAL INFORMATION

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

CLAYEY SAND FILL ~~AT DITCH~~.. THIS FILL IS INTERESTING (IN RELATION TO OTHER FILLS IN THE EXCAVATED SLOTT) IN THAT IT SLOPES CONSIDERABLY ~~NOT IN HALF SECTION~~ (IE NOT ALONG THE CUT SIDES) BUT LENGTHWISE FILLING IN A ~~SHARP ORIGIN~~ HOLE LEFT BY (OS) 790).

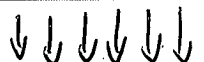
ITS COLOUR AND COMPOSITION IS VERY SIMILAR TO LOCAL NATURAL SOIL.

NO FINDS WERE RETRIEVED FROM THIS FILL.

AMENDED BY MG 04/10/17:

NATURAL INFILLING OF [OS 1793].

Refer to context



SKETCHES

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

(OS 1784) FOR NE-FAUNA SECTION SKETCH - MG 04/10/17

(OS 1787) FOR SE ——— || ———

(OS 1794) FOR SW ——— || ———

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEAS</b> | Sub-area/Trench<br><b>2</b>       | Context number<br><b>(051792)</b>                                                                                      |
| ECB#<br><b>1</b>        | Subgroup<br><b>1</b>      | Parent context<br><b>(051785)</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**[051793]** M4 09/10/17 STRATIGRAPHY

|                           |  |                 |  |                 |                 |
|---------------------------|--|-----------------|--|-----------------|-----------------|
|                           |  | <b>(051791)</b> |  | Same as context | <b>1</b>        |
| AMENDED BY<br>M4 04/10/17 |  |                 |  |                 | Cuts context    |
|                           |  | <b>(051792)</b> |  | Cut by context  | <b>(051793)</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><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" 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 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                                                                                                                                                                                                                                                               |  | Length                                                                                                                                                                                                                                                                                | Width | Depth                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <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 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 checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input checked="" 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>0.30</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             | <b>NO FINDS</b>          |
| 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 ☒

|            |                 |
|------------|-----------------|
| Date       | <b>27/09/17</b> |
| Initials   | <b>M4</b>       |
| Checked by | <b>M4</b>       |

|             |            |                                                          |                                                                                                                                         |
|-------------|------------|----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos. | Finds nos. | Photo nos.                                               | Drawing nos.                                                                                                                            |
| <b>1</b>    | <b>1</b>   | <b>050497 to 0501490</b><br><b>119</b><br><b>0501493</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D05371</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)

~~CLAYEY SAND FILL, FORMER FILL OF DITCH [051785] FILL IS VERY SIMILAR IN COMPOSITION TO (051791), BUT IS MORE GRAYISH-BROWN IN COLOUR AS COMPARED TO STRIKING ORANGE BROWN OF (051791).~~

NO FINDS WERE RETRIEVED FROM THIS FILL.

AMENDED 04/10/17:

BOTTOM FILL OF DITCH [051793].

Refer to context



SKETCHES

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

~~(051787) FOR SE-FACING SECTION~~

(051794) FOR SW-FACING SECTION

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA 5      | 2               | [051793]                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
| -         | -          | [051793]        | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|                          |  |                     |          |  |                 |                                          |
|--------------------------|--|---------------------|----------|--|-----------------|------------------------------------------|
|                          |  | <del>(051792)</del> | (051792) |  | Same as context | -                                        |
| * AMENDED<br>M9 04/10/17 |  | [051793]            |          |  | Cuts context    | <del>(051792)</del> (051790)<br>(051788) |
|                          |  | (051790)            |          |  | 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 checked="" type="checkbox"/> E-W<br><input 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 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  | Diameter |
| in metres                                                                                                                                                                                                                                                                               | > 1m                                                                                                                                                                                                                                                                                        | > 0.40                                                                                                                                                                                                                        | > 0.30 | -        |
| 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 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 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"/>                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| Thickness                                                                                                                                                        |  | Inclusions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | Interpretation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| <input type="checkbox"/> thin<br><input type="checkbox"/> medium<br><input type="checkbox"/> thick                                                               |  | 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"/> |  | 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"/> |  |
| frequency                                                                                                                                                        |  | bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |

## CROSS-REFERENCE

## Basic process

|                                                                                                                                                                |           |                       |                                                                                                                                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos                                                                                                                                                     | Finds nos | Photo nos             | Drawing nos                                                                                                                      |
| /                                                                                                                                                              | /         | 0501489 to<br>0501493 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D05371 |
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/><br>Date 27/09/17<br>Initials M9<br>Checked by HH |           |                       |                                                                                                                                  |

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 DITCH, LATEST FEATURE IN THE EXCAVATED SLOT. DITCH WAS ENCOUNTERED ON SW-FACING SECTION OF THE EXCAVATED SLOT AND IS BELIEVED THAT ONLY THE CURVE OF LARGER DITCH WAS EXCAVATED (HENCE THE IMPRESSION OF TERMINUS IN SW-FACING SECTION).

AMENDED 04/10/17:

CUT OF DITCH, ~~FEATURE~~ LATEST FEATURE IN THE EXCAVATED SLOT. DITCH WAS ENCOUNTERED IN SW-FACING LATEST SECTION OF SLOT AND IS CONTINUING IN SE-NW DIRECTION.

Refer to context [051783]

## SKETCHES

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

FOR PLAN SKETCH

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/field<br><b>TEAS</b> | Sub area/trench<br><b>2</b>       | Context number<br><b>(051794)</b>                                                                                      |
| ECB#<br><b>-</b>        | Subgroup<br><b>-</b>      | Parent context<br><b>[051793]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |               |                     |          |  |                 |   |
|--|---------------|---------------------|----------|--|-----------------|---|
|  |               | (051351)            | Subsurr  |  | Same as context | — |
|  |               | (051794)            |          |  | Cuts context    | — |
|  | Amended 04/10 | <del>(051793)</del> | (051791) |  | 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><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>Length Width Depth Diameter<br>in-metres |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <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 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"/> | <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 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 checked="" 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><br>0.30                                                                                                                                                              | 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<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                                                                                                                                                                                                                                                                                                                                                  | No Finds                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |

### CROSS REFERENCE

### Basic process

|             |           |                     |                                                                                                                                  |                                                                                                               |
|-------------|-----------|---------------------|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos. | Find nos. | Photo nos.          | Drawing nos.                                                                                                                     | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|             |           | 050489 To<br>050493 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>005371 | Date 27/07/17<br>Initials MS<br>Checked by MH                                                                 |

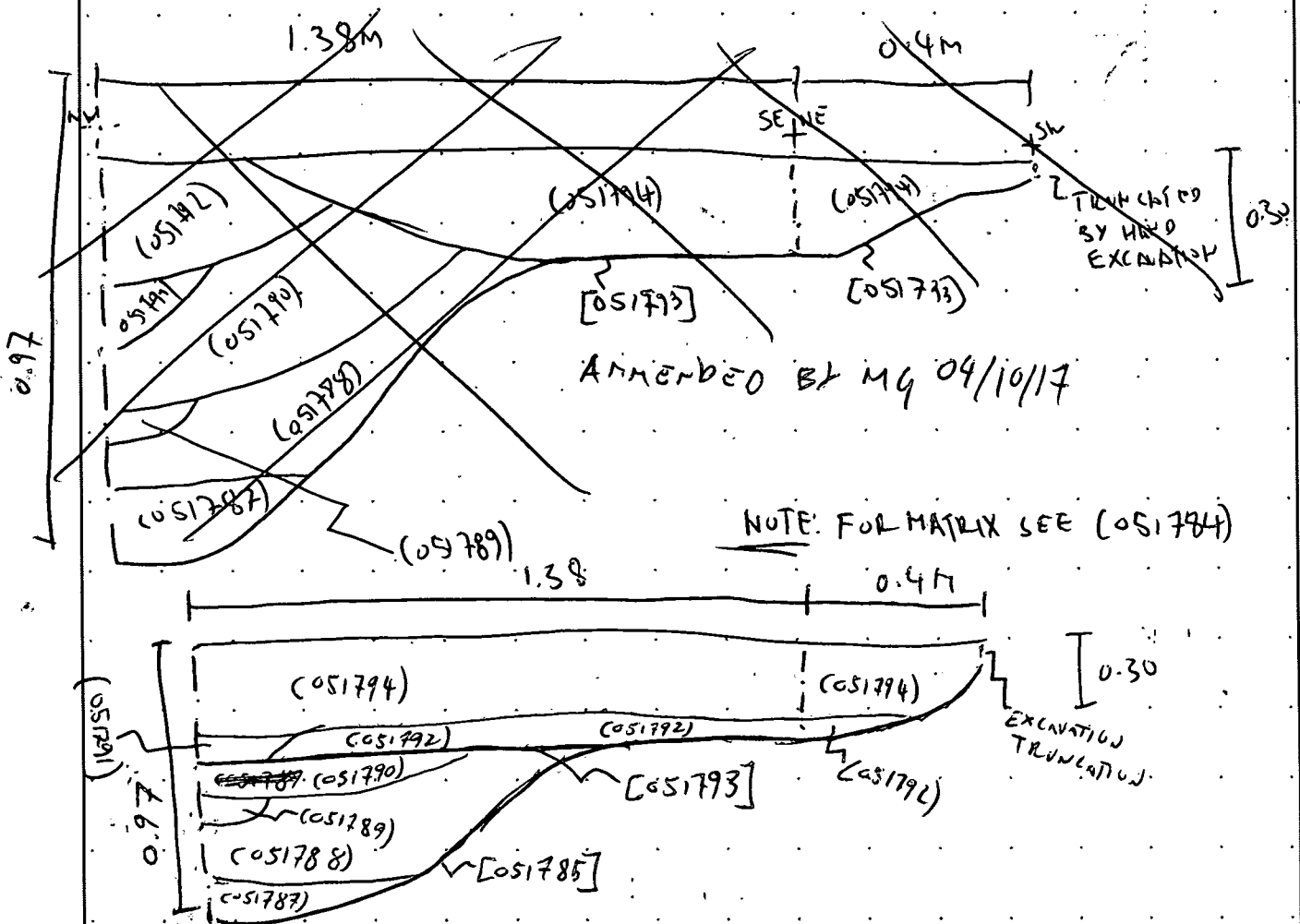
This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

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

FILL CONTAINED NO FINDS BUT WAS WHITE RICH IN GYLVES AND CHALK.

Refer to context

(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>TCA 1</b> | Sub-area/Trench<br><b>2</b>       | Context number<br><b>[051795]</b>                                                                                      |
| ECB.#                   | Subgroup                   | Parent context<br><b>[051795]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                         |  |                                                     |
|--|--|-------------------------|--|-----------------------------------------------------|
|  |  | <b>(051796)(051797)</b> |  | Same as context <input checked="" type="checkbox"/> |
|  |  | <b>[051795]</b>         |  | Cuts context <b>(051352)</b>                        |
|  |  | <b>(051352)</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 checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                             |                                | <input checked="" 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 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>                                                                                                                                                                                                                                                                            | <b>Width</b>                                                                                                                                                                                                                                 | <b>Depth</b><br><b>1.00</b> | <b>Diameter</b><br><b>3.50</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 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>                                                                                                                                                                                                                               | 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>CTP<br>mortar/plaster<br>leather/textile<br>glass<br>metal<br>industrial waste<br>lithics<br>coarse stone |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| frequency<br>bulk find                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|            |           |                                          |                                                                                                                                         |
|------------|-----------|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                | Drawing nos                                                                                                                             |
|            |           | 0501473<br>0501474<br>0501475<br>0501476 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D05372</b> |

## Basic process

|                                                                                                                 |
|-----------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> reuse <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>26/9/17</b>                                                                                             |
| Initials <b>SMG</b>                                                                                             |
| Checked by <b>HM</b>                                                                                            |

# ADDITIONAL INFORMATION

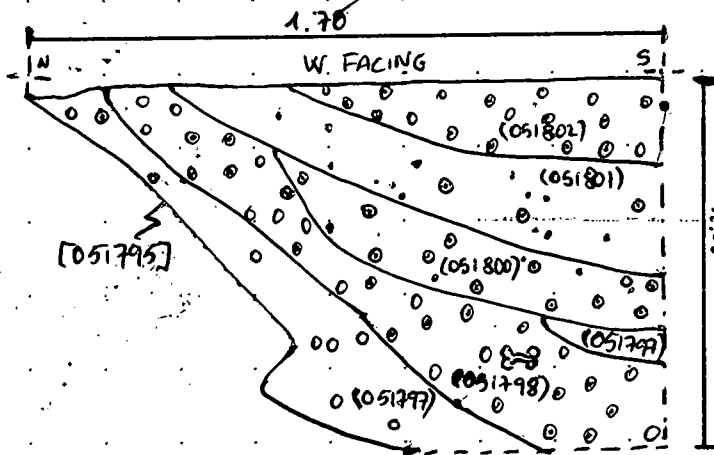
(any further details that may be important for understanding the context, including items marked \* overleaf)

THIS CONTEXT [051795] IS THE CUT OF A PIT, WHICH IS CUT AT THE NATURAL. THE NATURAL IS FORMED HERE FOR DIFFERENT LAYERS (CLAY AND GRAVEL), ~~EXPERIMENT~~ LIKELY ALLUVIAL DEPOSITS. THE PIT IS ALMOST CIRCULAR IN PLAN AND IT'S POSSIBLE THAT THE ORIGINAL CUT OF THE PIT WOULD BE REFILLED WITH THE SAME NATURAL BEFORE CUT. THE POTTERY GOT INTO PIT IS BRONZE/IRON AGE, BEING THIS AGE THE MOMENT OF BUILDING OF THIS PIT.

## SKETCHES

Refer to context (051796)(051797)

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



SCALE 1:20

### MATRIX

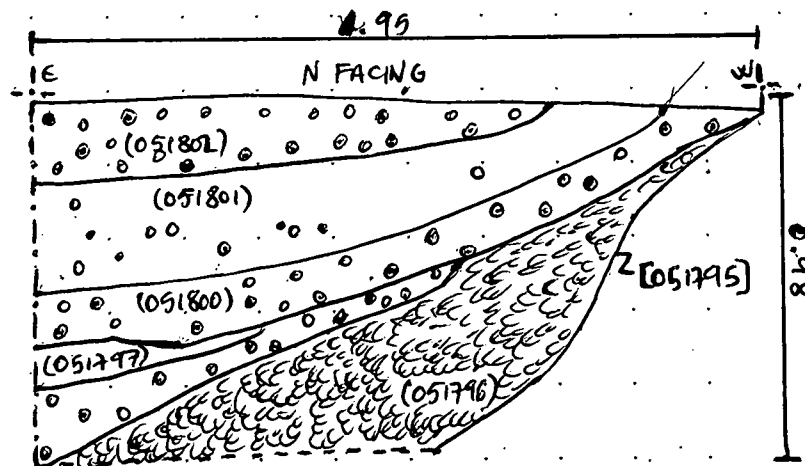
- (051350) TOPSOIL
- (051351) SUBSOIL
- (051802) FILL
- (051801) FILL
- (051800) FILL
- (051799) FILL
- (051798) FILL

FILL (051797) ~~(051796)~~ (051796) FILL

~~(051795)~~

[051795] CUT

(051352) NATURAL



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                   |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Sitecode<br><b>A 14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>2</b>       | Context number<br><b>(051796)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>[051795]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |   |
|--|--|-----------------|--|--|-----------------|---|
|  |  | <b>(051798)</b> |  |  | Same as context | / |
|  |  | <b>(051796)</b> |  |  | Cuts context    | / |
|  |  | <b>[051795]</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                                                                                                                                       | <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"/>              |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## 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 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 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 type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input checked="" 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>0.51</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 <b>F</b>                                                                                                                                                                    | 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 | Finds nos | Photo nos                                | Drawing nos                                                                                                                             |
| /          | /         | 0501473<br>0501474<br>0501475<br>0501476 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D05372</b> |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>26/9/17</b>                                                                                           |
| Initials <b>SMG</b>                                                                                           |
| Checked by <b>HM</b>                                                                                          |

# ADDITIONAL INFORMATION

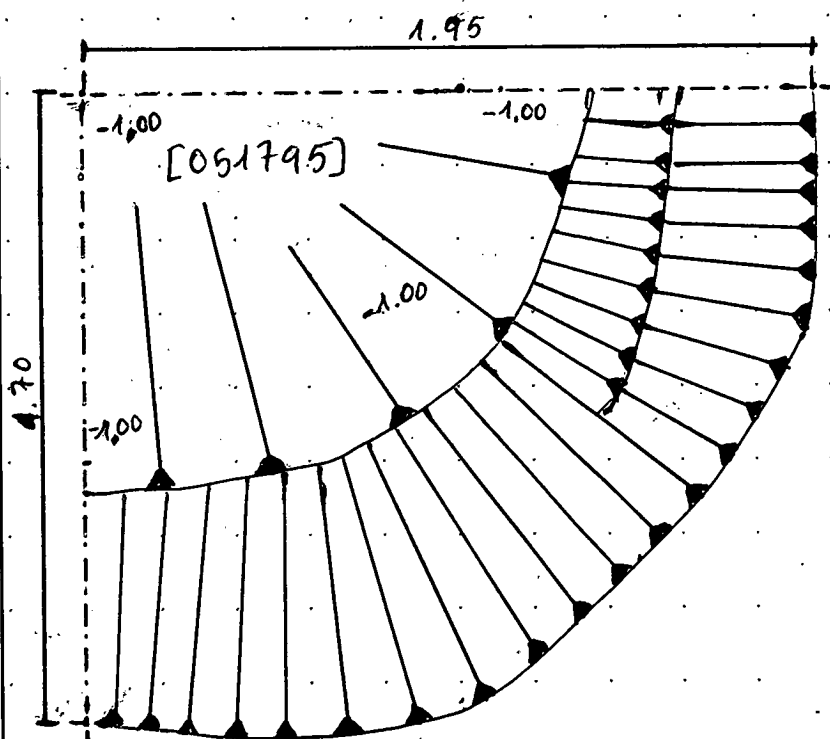
(any further details that may be important for understanding the context, including items marked \* overleaf)

THIS CONTEXT (051796) IS THE FILL OF A PIT. THIS FILL IS FORMED ~~AFTER THE PIT WAS MADE~~ BECAUSE OF THE WEATHERING OR EROSION JUST AFTER THEY MADE THE PIT. THIS FILL IS COMPOSED OF GRAVEL AND CLAY, MAINLY THE GRAVEL IS SILEX STONES AND CHALK, BUT WITHOUT ARCHAEOLOGICALS FINDS. THIS IS VERY LOOSE AND I EXCAVATED IT ~~WITH~~ CLEANING WITH THE SMALL TROWEL

Refer to context [051795] (051797)

## SKETCHES

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



SCALE 1:10

## STRATIGRAPHY

|  |  |          |  |  |                 |  |
|--|--|----------|--|--|-----------------|--|
|  |  | (051798) |  |  | Same as context |  |
|  |  | (051797) |  |  | Cuts context    |  |
|  |  | (051795) |  |  | 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><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>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"/>                                       |  |                                                                                                                                                                                                                                                                               |              |              |

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

# INTERPRETATION

| Compaction                                                        |                                                        | Colour                                                                                                                                |                          | Composition                                                              |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|--------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input checked="" type="checkbox"/> moderately 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 |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> friable                       | brownish <input type="checkbox"/> <input type="checkbox"/> brown                                                                      |                          | silty <input type="checkbox"/> <input type="checkbox"/> silt             |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                                        | greyish <input type="checkbox"/> <input checked="" type="checkbox"/> grey                                                             |                          | sandy <input type="checkbox"/> <input type="checkbox"/> sand             |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                                        | 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                                                         |                                                        |                                                                                                                                       |                          |                                                                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.36                                                              |                                                        | 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                                                      | 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"/> |

☐ 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"/> disuse <input checked="" type="checkbox"/> |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
|  |  | 0501473<br>0501474<br>0501475<br>0501476 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><br>D05372 | Date: 26/9/17<br>Initials: SMG<br>Checked by: MH                                                              |

# ADDITIONAL INFORMATION

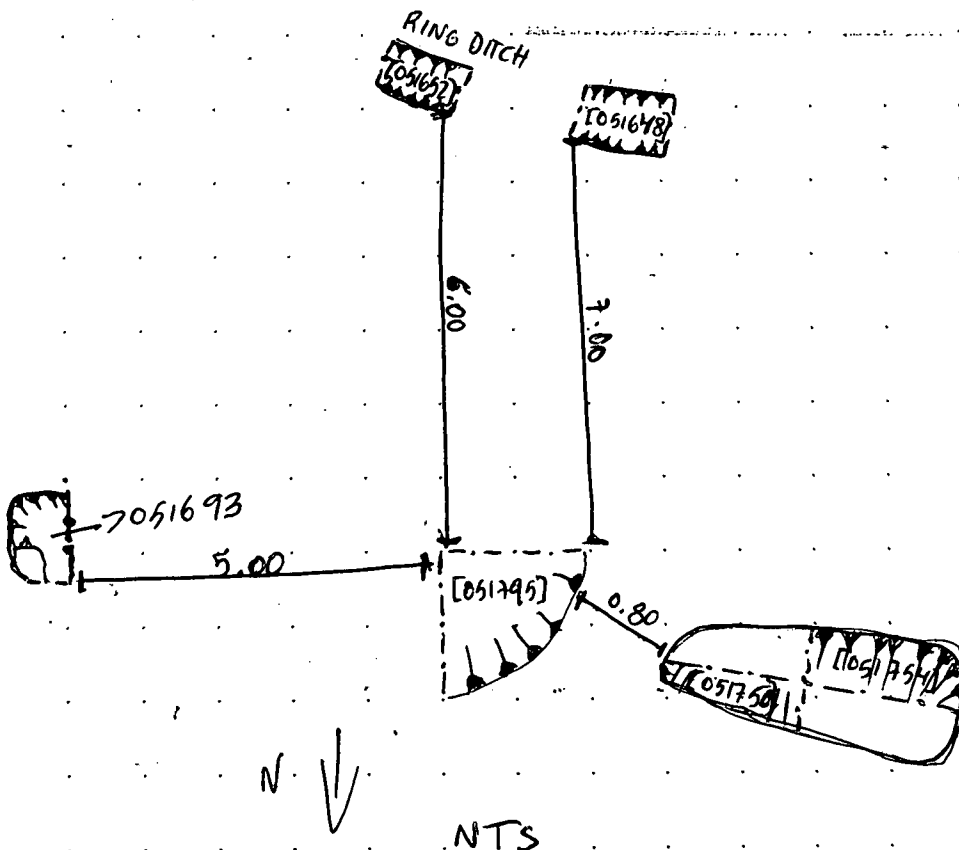
(any further details that may be important for understanding the context, including items marked \*overleaf)

THIS CONTEXT (051797) IS THE FILL OF A PIT, WHICH IS FORMED FOR THE WEATHERING OR EROSION PROCESS OF NATURAL CLAY, ALMOST WITHOUT INCLUSIONS, ONLY A FEW SILEX STONES, ANIMALS BONES AND POTTERY. THE POTTERY IS BRONZE/IRON AGE.

Refer to context [051795] (051796) (051797) (051798)

## SKETCHES

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





## STRATIGRAPHY

|  |  |                  |  |  |                 |   |
|--|--|------------------|--|--|-----------------|---|
|  |  | (051799)         |  |  | Same as context | / |
|  |  | (051798)         |  |  | Cuts context    | / |
|  |  | (051796)(051797) |  |  | 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><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 (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"/>                                       |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                   |                 |

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

## INTERPRETATION

[illegible]

### Basic process

|            |          |                                          |                                                                                                                                      |                                                                                                               |
|------------|----------|------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos | Find nos | Photo nos                                | Drawing nos                                                                                                                          | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| /          | /        | 0501473<br>0501474<br>0501475<br>0501476 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><br>D05372 | Date 26/9/17<br>Initials SMG<br>Checked by MH                                                                 |



# ADDITIONAL INFORMATION

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

THIS CONTEXT (051798) IS THE FILL OF A PIT, WHICH IS FORMED BECAUSE OF WEATHERING AND EROSION PROCESS OF THE NATURAL (LIGHT BROWN CLAY AND GRAVEL). IN THIS FILL I GET ANIMALS BONES AND POTTERY AND APPAR SILK STONES AND CHALK. THE POTTERY IS BRONZE/IRON AGE

Refer to context [051795](051796)(051797)

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

## SKETCHES

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                          |                            |                                   |                                                                                                                        |
|--------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TEA 5</b> | Sub-area/Trench<br><b>2</b>       | Context number<br><b>(051799)</b>                                                                                      |
| ECB#                     | Subgroup                   | Parent context<br><b>[051795]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(051800)</b> |  |  | Same as context |
|  |  | <b>(051799)</b> |  |  | Cuts context    |
|  |  | <b>(051798)</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>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>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 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 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 type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input checked="" 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 checked="" type="checkbox"/> white <input type="checkbox"/> other* <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions:</b>                                                                                                                                                                    |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 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                  |
| 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 | Photo nos                                | Drawing nos                                                                                                                             |
|            |           | 0501473<br>0501474<br>0501475<br>0501476 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D09372</b> |

## Basic process

|                                       |                                         |                                 |
|---------------------------------------|-----------------------------------------|---------------------------------|
| construction <input type="checkbox"/> | use <input checked="" type="checkbox"/> | disuse <input type="checkbox"/> |
| Date                                  | <b>26/9/17</b>                          |                                 |
| Initials                              | <b>SMG</b>                              |                                 |
| Checked by                            | <b>HH</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 (051799) IS THE FILL OF A PIT, WHICH IS FORMED BECAUSE OF USE OF FIRE AND COVER WITH CLAY, APPEARING THREE ~~LAY~~ FIRE LAYERS ~~REMARK~~ AND TWO CLAY LAYERS ~~REMARK~~ THAT THEY HAVE 2/3 CENTIMETER. ~~REMARK~~ SURELY THIS FILL IS RELATED WITH A OVEN AREA. THIS FILL IS CHARACTERIZED NOT TO HAVE INCLUSIONS.

Refer to context (051795) (051796) (051797) SKETCHES  
(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)