

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEAL</b> | Sub-area/Trench<br><b>S</b>       | Context number<br><b>(410620)</b>                                                                                      |
| ECB #                   | Subgroup                  | Parent context<br><b>[410622]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |              |  |  |                                                   |
|--|--|--------------|--|--|---------------------------------------------------|
|  |  | (410619)     |  |  | Same as context<br>Cuts context<br>Cut by context |
|  |  | this context |  |  |                                                   |
|  |  | [410622]     |  |  |                                                   |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                          |                  |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                          |                  |                     | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>▲                                                                                                                     | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input type="checkbox"/> steep<br>L <input type="checkbox"/> moderate<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>U <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 (L)</b>                                                                                                                                                                                                                                                                           | <b>Width (W)</b>                                                                                                                                                                                                                                         | <b>Depth (D)</b> | <b>Diameter (Ø)</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 checked="" type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Composition</b><br>clayey <input type="checkbox"/> 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 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 (max)</b><br>0.25m                                                                                                                                                       | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |  |  |  |   |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                | <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td>F</td> <td></td> <td></td> <td></td> <td>O</td> <td></td> <td></td> <td>O</td> <td>O</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>bulk find</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | stones*                  | chalk                    | iron pan                 | manganese                | charcoal                            | plant remains*                      | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal        | industrial waste | lithics | coarse stone | frequency | F |  |  |  | O |  |  | O | O |  |  |  |  |  |  |  |  |  | bulk find | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| stones*                                                                                                                                                                               | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | iron pan                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | manganese                | charcoal                 | plant remains*           | wood                     | marine shell                        | bone*                               | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone |                  |         |              |           |   |  |  |  |   |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                             | F                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          | O                        |                          |                                     | O                                   | O                        |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |  |  |  |   |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                                                                                                                                             | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |              |                  |         |              |           |   |  |  |  |   |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |  |  |  |   |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |  |  |  |   |  |  |   |   |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |

## CROSS REFERENCE

|                |               |                                               |                                                                                                                                                                            |
|----------------|---------------|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br> | Finds nos<br> | Photo nos<br><b>4100582</b><br><b>4100589</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>SH: 21</b><br><b>OW: 41118</b> |
|----------------|---------------|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>01.6.17</b>                                                                                           |
| Initials <b>AM/LC</b>                                                                                         |
| Checked by <b>LWC</b>                                                                                         |

This form is incomplete if fields marked with \* are empty. Please turn over 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/GRAVELLY ~~AND~~ LOWEST FILL OF POSSIBLE PIT [410622]. THE MOST NOTABLE FEATURE OF THIS FILL IS THE DENSITY OF COBBLE-SIZED (0.10 - 0.20m DIAMETER) STONES VARYING IN SHAPE - SOME ROUNDED; OTHERS ~~APPROXIMATE~~ FLAT / AMORPHOUS) LINING THE BASE, OFTEN LODGED INTO THE UNDERLYING BLUE CLAY NATURAL. DESPITE THEIR FREQUENCY, THESE ARE NOT THOUGHT TO BE INTENTIONALLY PLACED - POSSIBLY THE RESULT OF A NATURAL SPRING SILTING UP AND LATER BEING ~~AND~~ CUT INTO TO MAKE A PIT. FILL IS A MID GREY COLOUR MOTTLED WITH YELLOW. OCCASIONAL FAUNAL REMAINS WERE GENERALLY FRAGMENTED AND VERY BRITTLE. OCCASIONAL POT SHARDS APPEARED BROADLY IRON AGE IN DATE.

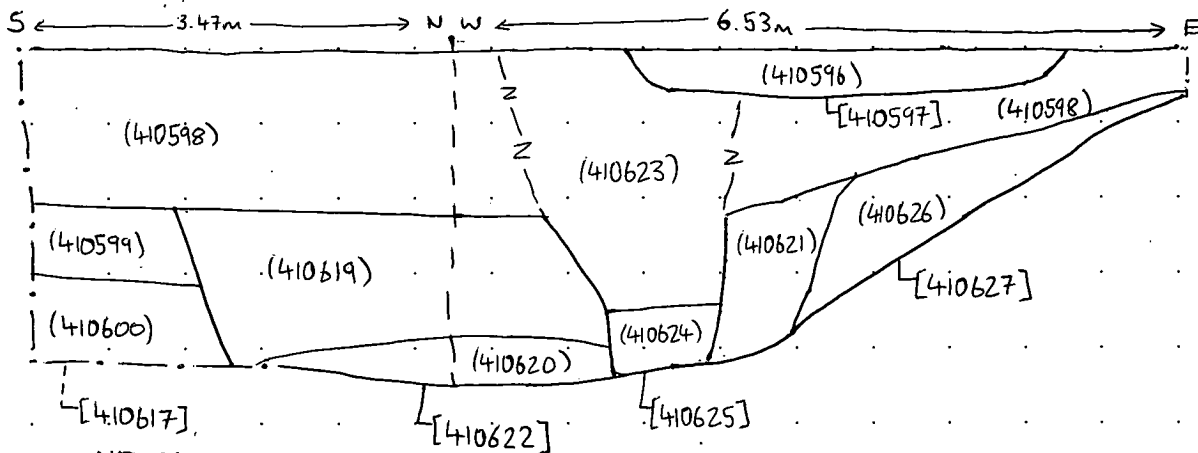
Refer to context

## SKETCHES

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

DWG # 41118

SKETCH PLAN OF EAST-FACING SECTION & SOUTH-FACING SECTION OF RELATIONSHIP SLOT.



NOT VISIBLE  
IN E-FAC SECTION  
BECAUSE 1m DEPTH  
LIMIT WAS REACHED

KEY:

-Z- = EDGE NOT  
CLEAR

NOT TO SCALE