



|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>BA29</b> | Sub-area/Trench                   | Context number<br><b>[290489]</b>                                                                                      |
| ECB #                   | Subgroup                  | Parent context<br><b>[290489]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

STRATIGRAPHIC MATRIX

STRATIGRAPHY

|  |  |                 |                 |  |                 |
|--|--|-----------------|-----------------|--|-----------------|
|  |  | <b>(290489)</b> |                 |  | Same as context |
|  |  | this context    | <b>[290489]</b> |  | Cuts context    |
|  |  | <b>(290003)</b> | <b>NAT</b>      |  | Cut by context  |

**CUT**

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

DESCRIPTION

INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                          |                                 |                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                          |                                 |                                    | pit <input type="checkbox"/><br>post-hole <input 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 checked="" type="checkbox"/> moderate<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* | <b>Base</b><br>I <input 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 (L)</b>                                                                                                                                                                                                                                                                                      | <b>Width (W)</b>                                                                                                                                                                                                                                         | <b>Depth (D)</b><br><b>0.22</b> | <b>Diameter (Ø)</b><br><b>0.48</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of (tick all that apply)</b><br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                          |                                 |                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                          |                                 |                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

**FILL/DEPOSIT**

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

DESCRIPTION

INTERPRETATION

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

CROSS REFERENCE

|            |           |                                                         |                                                                                                                                              |
|------------|-----------|---------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                               | Drawing nos                                                                                                                                  |
|            |           | 2900551<br>2900562-3<br>2900568-9<br>2900618<br>2900624 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>029127 S.20</b> |

Basic process

construction ☒ use ☐ disuse ☐

Date **28/03/17**

Initials **CG**

Checked by

# ADDITIONAL INFORMATION

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

CUT OF POSTHOLE. FILLED BY (290490) AND (290491). FORMS PART OF [290496]. MOD SLOPING SIDES WITH CONCAVE BASE

## SKETCHES

Refer to context

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

