

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>-</b>       | Context number<br><b>(161250)</b>                                                                                      |
| ECB #<br><b>-</b>       | Subgroup<br><b>-</b>        | Parent context<br><b>(161235)</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|                 |                 |                 |  |                 |          |
|-----------------|-----------------|-----------------|--|-----------------|----------|
| <b>(161239)</b> | <b>(161238)</b> |                 |  | Same as context | <b>-</b> |
|                 | <b>(161250)</b> |                 |  | Cuts context    | <b>-</b> |
|                 |                 | <b>(161237)</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                                                                                                                                       | <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"/>                                       |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                       |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                            | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input 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 checked="" 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>0.10 m</b>                                                                                                                                                                                                                | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 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                                                                                                                                                                                                                           | F<br><input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

|                             |                        |                                                     |                                                                                                                                                                    |
|-----------------------------|------------------------|-----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos.<br><b>16175</b> | Finds nos.<br><b>-</b> | Photo nos.<br><b>1610537-76</b><br><b>1610528-9</b> | Drawing nos. <b>#15</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16193</b> |
|-----------------------------|------------------------|-----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>19.12.17</b><br>Initials <b>AM</b><br>Checked by                                                      |

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

# ADDITIONAL INFORMATION

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

A charcoal layer found within ditch [161235], although it was not present in either sections. Photographed and sampled.

Dimensions: N-S 0.70 m. - E-W 0.35 m. Found at a depth of 0.60 m. and 0.80 m off from the west facing section.

See below

Deposition: Although it is likely to be a deliberate dump of material, it is certainly mixed in with the clayey fills above and below it. It is contained in a localised area near the west facing section.

Finds/Inclusions: Aside from the large amount of charcoal no other material was retrieved.

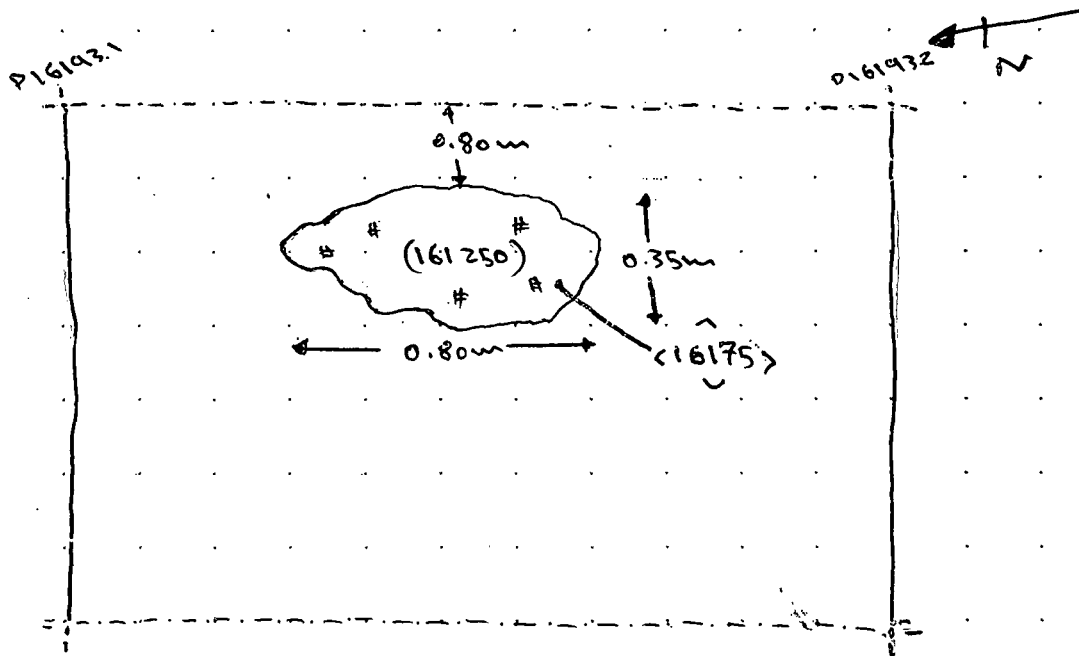
Stratigraphy Sits on top of Sill (161237) and is physically capped by (161238) +

Refer to context

161235  
161236  
161237

## SKETCHES

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



Location of charcoal layer in plan.  
Not seen in either section.

Not to Scale

\* Approximate shape of Sill



## STRATIGRAPHY

|  |  |         |  |  |                 |        |
|--|--|---------|--|--|-----------------|--------|
|  |  |         |  |  | Same as context | 161432 |
|  |  | 161251  |  |  | Cuts context    | /      |
|  |  | 161433? |  |  | 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 checked="" type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                                                                                            |  | <b>Sides</b><br><input checked="" type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |  | <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                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                   |
| Length                                                                                                                                                                                                                                                                                       |  | Width                                                                                                                                                                                                                                                                                            |  | Diameter                                                                                                                                                                                                                          |
| Shape result of (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"/>                                   |  |                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                   |

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

## INTERPRETATION

| Compaction                                                        |                                                                                                                                                                                                                                                                                                                                                                                                    | Colour                                                                                                                                                                    |                                                                                                                                                                    | Composition              |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input type="checkbox"/> light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/>                                                                                                                                                                                                                                     | <input type="checkbox"/> clayey <input type="checkbox"/> silty <input checked="" type="checkbox"/> sandy <input type="checkbox"/> gravelly <input type="checkbox"/> peaty | <input checked="" type="checkbox"/> clay <input type="checkbox"/> silt <input type="checkbox"/> sand <input type="checkbox"/> gravel <input type="checkbox"/> peat |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input checked="" type="checkbox"/> moderately compact            | <input type="checkbox"/> brownish <input type="checkbox"/> brown <input type="checkbox"/> greyish <input type="checkbox"/> grey <input type="checkbox"/> 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"/> loose                                    |                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                           |                                                                                                                                                                    |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> friable                                  |                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                           |                                                                                                                                                                    |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                           |                                                                                                                                                                    |                          |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.24m!                                                            | black <input checked="" 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                      | field clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |                          |
| frequency                                                         | O                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                           |                                                                                                                                                                    |                          | F                        |                          |                          |                          | M                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                         | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/>                                                                                                                                                  | <input type="checkbox"/>                                                                                                                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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 checked="" type="checkbox"/> disuse <input type="checkbox"/> |
|------------|-----------|-----------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| 16178      |           |           | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | Date: 19.12.17<br>Initials: CV<br>Checked by:                                                                 |

# ADDITIONAL INFORMATION

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

FILL OF CREMATION.

MAY BE THE CREMATION IS CONNECTED WITH 161160

IT IS STILL UNDER EXCAVATION.

PROBABLY IT IS ALSO CONNECTED WITH ANOTHER

FEATURE THAT IS CLOSE TO IT

Refer to context 16117

## 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>TEA16</b> | Sub-area/Trench                   | Context number<br><b>(161252)</b>                                                                                      |
| ECB #                    | Subgroup                   | Parent context<br><b>[161253]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  |                 |  |  | Same as context |
|  |  | <b>(161252)</b> |  |  | Cuts context    |
|  |  | <b>[161253]</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 checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                 |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                                                |  | <b>Sides</b><br>1 <input type="checkbox"/> vertical<br>2 <input type="checkbox"/> steep<br>3 <input type="checkbox"/> moderate sloping<br>4 <input type="checkbox"/> gentle<br>5 <input type="checkbox"/> stepped<br>6 <input type="checkbox"/> undercutting<br>7 <input type="checkbox"/> complex* |              | <b>Base</b><br>1 <input type="checkbox"/> flat<br>2 <input type="checkbox"/> concave<br>3 <input type="checkbox"/> v-shaped<br>4 <input type="checkbox"/> sloping<br>5 <input type="checkbox"/> uneven<br>6 <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     |  | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                             |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

### FILL/DEPOSIT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input checked="" type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input checked="" 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 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>0.15m</b>                                                                                                                                                      |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                             | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                      | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### CROSS REFERENCE

|                               |                       |                             |                                                                                                                            |
|-------------------------------|-----------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>SC161797</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610553</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|-------------------------------|-----------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☐ use ☐ disuse ☒

Date **19/12/17**

Initials **WE**

Checked by

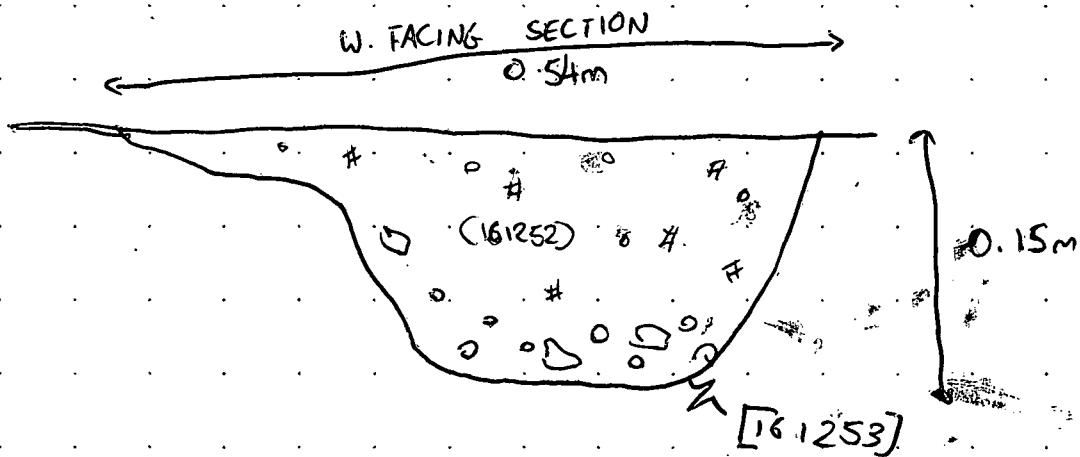
This form is incomplete if fields marked with \* are empty. PTO for additional information (and describing all items marked with \*) and sketches.

FILL OF PIT [161253], SILTY SAND MATERIAL CONTAINING GRAVEL, CHARCOAL AND A LITHIC. COULD VERY EASILY BEEN WASHED INTO THE FEATURE AND MIXED WITH WIND BLOWN CHARCOAL LIKELY - RELATED TO BARROW ACTIVITY

Refer to context: [161253]

SKETCHES

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



KEY

- GRAVEL
- # CHARCOAL

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                          |                             |                                   |                                                                                                                        |
|--------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>1EA 16</b> | Sub-area/Trench                   | Context number<br><b>(161258)</b>                                                                                      |
| ECB#                     | Subgroup                    | Parent context<br><b>[161134]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161135)</b> |  |  | Same as context |
|  |  | <b>(161258)</b> |  |  | Cuts context    |
|  |  | <b>[161134]</b> |  |  | 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><input type="checkbox"/> N-S</p> <p><input type="checkbox"/> E-W</p> <p><input type="checkbox"/> NE-SW</p> <p><input type="checkbox"/> NW-SE</p> <p>N </p>                                                                                                                |  | <p><input type="checkbox"/> vertical</p> <p><input 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 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 type="checkbox"/> moderately compact</p> <p><input type="checkbox"/> loose</p> <p><input checked="" 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 type="checkbox"/> brown</p> <p>greyish <input checked="" type="checkbox"/> grey</p> <p>orangeish <input type="checkbox"/> orange</p> <p>yellowish <input type="checkbox"/> yellow</p> <p>reddish <input type="checkbox"/> red</p> <p>blueish <input type="checkbox"/> blue</p> |                          | <p>clayey <input type="checkbox"/> clay</p> <p>silty <input type="checkbox"/> silt</p> <p>sandy <input checked="" type="checkbox"/> sand</p> <p>gravelly <input type="checkbox"/> gravel</p> <p>peaty <input type="checkbox"/> peat</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>                                                                                                |  | 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"/> |

## CROSS REFERENCE

|            |           |                                                                                                           |             |
|------------|-----------|-----------------------------------------------------------------------------------------------------------|-------------|
| Sample nos | Finds nos | Photo nos                                                                                                 | Drawing nos |
| /          | /         | 1610558-59                                                                                                | D16146      |
|            |           | Surveyed:                                                                                                 |             |
|            |           | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |             |
|            |           | SHEET 16                                                                                                  |             |

## Basic process

|                                       |                              |                                            |
|---------------------------------------|------------------------------|--------------------------------------------|
| construction <input type="checkbox"/> | use <input type="checkbox"/> | disuse <input checked="" type="checkbox"/> |
| Date                                  | 20.12.17                     |                                            |
| Initials                              | FG                           |                                            |
| Checked by                            |                              |                                            |

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

02/12

*Refer to context*

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



## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161056) |  |  | Same as context |
|  |  | (161259) |  |  | Cuts context    |
|  |  | (161123) |  |  | Cut by context  |

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

## INTERPRETATION

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

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

## INTERPRETATION

[illegible]

### Basic process

|                |           |            |                                                                                                             |        |                                                                                                               |
|----------------|-----------|------------|-------------------------------------------------------------------------------------------------------------|--------|---------------------------------------------------------------------------------------------------------------|
| Sample nos     | Finds nos | Photo nos  | Drawing nos                                                                                                 | 016196 | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| 16183<br>16187 | /         | 1610558-59 | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |        | Date 20-12-17<br>Initials FG/CV<br>Checked by                                                                 |
| SHEET 16       |           |            |                                                                                                             |        |                                                                                                               |

# ADDITIONAL INFORMATION

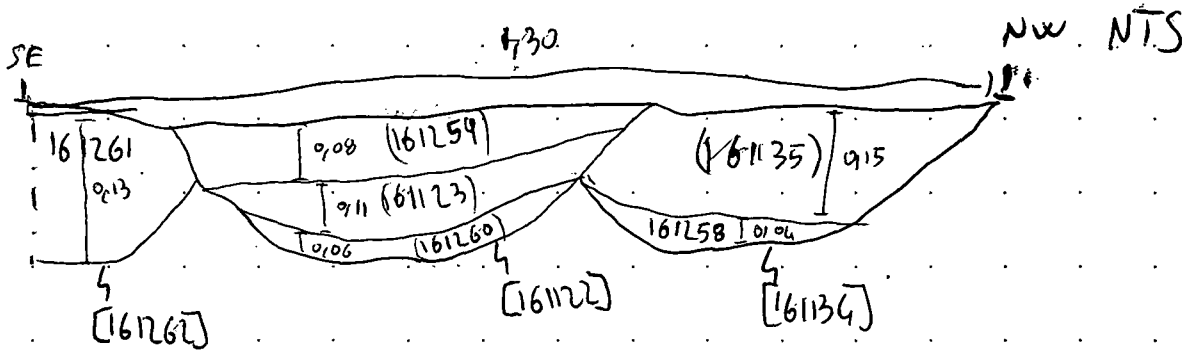
(any further details that may be important for understanding the context, including items marked \* overleaf)

GREY LAYER POSSIBLE DELIBERATE BACKFILL OF THE PIT  
[161122] IT HAS SOME LITTLE STONE INSIDE AND BURNT CLAY

Refer to context

SKETCHES

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



## STRATIGRAPHY.

|  |  |         |  |  |                 |         |
|--|--|---------|--|--|-----------------|---------|
|  |  | [61122] |  |  | Same as context |         |
|  |  | (61261) |  |  | Cuts context    |         |
|  |  | [61262] |  |  | Cut by context  | [61122] |

(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 checked="" 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 (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<br><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"/> |                          |                          |                          |                          |                                           |                                          | clayey <input type="checkbox"/>             | <input type="checkbox"/> clay | topsoil <input type="checkbox"/> |                          |                                              |                          |                          |                                        |                                            |
|                                                                   |                                                                                                                                  | brownish <input type="checkbox"/>             | <input checked="" type="checkbox"/> brown |                                 |                                  |                          |                          |                          |                          | silty <input type="checkbox"/>            | <input checked="" type="checkbox"/> silt | subsoil <input type="checkbox"/>            |                               |                                  |                          |                                              |                          |                          |                                        |                                            |
|                                                                   |                                                                                                                                  | greyish <input type="checkbox"/>              | <input checked="" type="checkbox"/> grey  |                                 |                                  |                          |                          |                          |                          | 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          | remnant topsoil <input type="checkbox"/>    |                               |                                  |                          |                                              |                          |                          |                                        |                                            |
|                                                                   |                                                                                                                                  | yellowish <input checked="" type="checkbox"/> | <input type="checkbox"/> yellow           |                                 |                                  |                          |                          |                          |                          | peaty <input type="checkbox"/>            | <input type="checkbox"/> peat            | surface <input type="checkbox"/>            |                               |                                  |                          |                                              |                          |                          |                                        |                                            |
|                                                                   |                                                                                                                                  | reddish <input type="checkbox"/>              | <input type="checkbox"/> red              |                                 |                                  |                          |                          |                          |                          |                                           |                                          | occupation layer <input type="checkbox"/>   |                               |                                  |                          |                                              |                          |                          |                                        |                                            |
|                                                                   |                                                                                                                                  | blueish <input type="checkbox"/>              | <input type="checkbox"/> blue             |                                 |                                  |                          |                          |                          |                          |                                           |                                          | dumped layer <input type="checkbox"/>       |                               |                                  |                          |                                              |                          |                          |                                        |                                            |
| Thickness                                                         |                                                                                                                                  |                                               |                                           |                                 |                                  |                          |                          |                          |                          |                                           |                                          |                                             |                               |                                  |                          | deliberate backfill <input type="checkbox"/> |                          |                          |                                        |                                            |
| 0.12                                                              |                                                                                                                                  | black <input type="checkbox"/>                | white <input type="checkbox"/>            | other* <input type="checkbox"/> |                                  |                          |                          |                          |                          |                                           | other* <input type="checkbox"/>          | destruction debris <input type="checkbox"/> |                               |                                  |                          |                                              |                          |                          |                                        |                                            |
| Inclusions                                                        |                                                                                                                                  |                                               |                                           |                                 |                                  |                          |                          |                          |                          |                                           |                                          |                                             |                               |                                  |                          |                                              |                          |                          | bedding layer <input type="checkbox"/> |                                            |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                                                                                                          | chalk                                         | iron pan                                  | manganese                       | charcoal                         | plant remains*           | wood                     | marine shell             | bone*                    | pot                                       | fired clay / CBM                         | CTP                                         | mortar/plaster                | leather/textile                  | glass                    | metal                                        | industrial waste         | lithics                  | coarse stone                           | 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"/>           |
| frequency                                                         | O                                                                                                                                |                                               |                                           |                                 | O                                |                          |                          |                          |                          |                                           |                                          |                                             |                               |                                  |                          |                                              |                          |                          | cremation <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"/> | other fill/deposit (describe below)    |                                            |

### Basic process

| Sample nos | Finds nos | Photo nos | Drawing nos                                                                                                            | SHEET 16 | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
|------------|-----------|-----------|------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------------------------------|
| /          | /         | 1610558-9 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |          |                                                                                                    |
|            |           |           | D 16146                                                                                                                |          |                                                                                                    |

| Date    | Initials | Checked by |
|---------|----------|------------|
| 7.12.17 | FO       |            |

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

FILL OF THE RING DITCH EXCAVATED ONLY  
FOR A SMALL PORTION, IN ORDER TO UNDERSTAND  
THE RELATIONSHIP WITH THE CLUSTER OF PIT.

|        |        |
|--------|--------|
| 161122 | 161158 |
| 161136 | 161259 |

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

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                           |                          |                                 |                                                                                                                        |
|---------------------------|--------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 領</b> | Area/Field <b>TEA-16</b> | Sub-area/Trench<br><b>16</b>    | Context number<br><b>161267</b>                                                                                        |
| ECB#                      | Subgroup                 | Parent context<br><b>161267</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                                                     |
|--|--|---------------|--|--|-----------------------------------------------------|
|  |  | <b>161268</b> |  |  | Same as context <input checked="" type="checkbox"/> |
|  |  | <b>161267</b> |  |  | Cuts context                                        |
|  |  |               |  |  | Cut by context                                      |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                      |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input 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 checked="" 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 checked="" type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                      |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br>N/A                                                                                                                                                                                                                                                                     | <b>Width</b><br>N/A                                                                                                                                                                                                                          | <b>Depth</b><br>0.13 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>Diameter</b><br>0.287                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                      |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <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"/>                                       |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                      |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>Possible CREMATION</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 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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

|            |               |                                                                                                                                              |                                                                                                                                                                                                 |
|------------|---------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos     | Photo nos                                                                                                                                    | Drawing nos                                                                                                                                                                                     |
|            | <b>F16301</b> | <b>1610571</b><br><b>1610572</b><br><b>1610560</b><br><b>1610561</b><br><b>1610573</b><br><b>1610514</b><br><b>1610575</b><br><b>1610576</b> | <b># 17</b><br>Surveyed <input checked="" type="checkbox"/><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16198 D1697</b> |

|                                                                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------|
| <b>Basic process</b><br>construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>4/1/18</b>                                                                                                                    |
| Initials <b>CH CS</b>                                                                                                                 |
| Checked by                                                                                                                            |

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

# ADDITIONAL INFORMATION

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

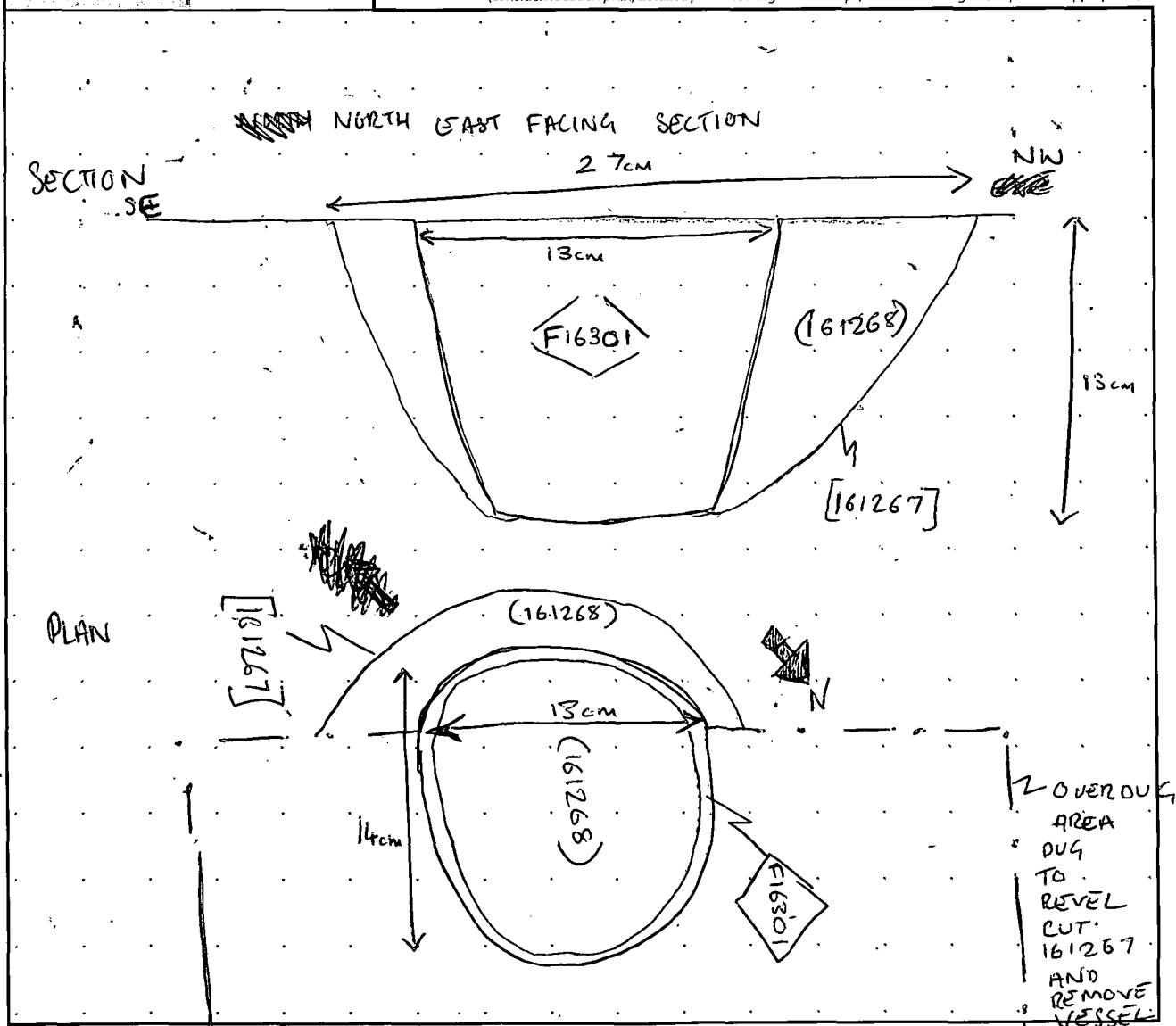
SMALL PIT CUT INTO BARROW DITCH CONTAINING  
A COMPLETE BRONZE AGE VESSEL (F16301).  
VESSEL APPEARS TO HAVE BEEN TRUNCATED AT THE  
TOP BY MACHINE.

WHILE EXCAVATING HEAVY RAIN OVER NIGHT  
MAY ~~HAVE~~ AFFECTED THE POT?  
POSSIBLE CREMATION.

Refer to context

## SKETCHES

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





## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  |        |  |  | Same as context |
|  |  | 161268 |  |  | Cuts context    |
|  |  | 161267 |  |  | 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><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;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="margin-left: 10px;">           sloping         </div> </div> |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Depth</b> | <b>Diameter</b>                                                                                                                                                                                                                   |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |

pit ☐

post-hole ☐

stake-hole ☐

ditch ☐

ring-ditch ☐

beam slot ☐

construction cut ☐

robber cut ☐

gully ☐

palaeochannel ☐

furrow ☐

field boundary ☐

burial cut ☐

other cut (describe below) ☐

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

## INTERPRETATION

| Compaction                                                        |                                                        | Colour                                                                                                                                                             |                                 | Composition                                                              |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
|-------------------------------------------------------------------|--------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input checked="" type="checkbox"/> moderately compact | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/>                              |                                 | clayey <input checked="" type="checkbox"/> <input type="checkbox"/> clay | <input type="checkbox"/> clay       |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> friable                       | brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown                                                                                        | <input type="checkbox"/> grey   | silty <input type="checkbox"/> <input checked="" type="checkbox"/> silt  | <input type="checkbox"/> sand       |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
|                                                                   |                                                        | orangeish <input type="checkbox"/> <input type="checkbox"/> orange                                                                                                 | <input type="checkbox"/> yellow | sandy <input type="checkbox"/> <input type="checkbox"/> gravel           | <input type="checkbox"/> peat       |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
|                                                                   |                                                        | yellowish <input type="checkbox"/> <input type="checkbox"/> red                                                                                                    | <input type="checkbox"/> blue   | gravelly <input type="checkbox"/> <input type="checkbox"/> peat          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
|                                                                   |                                                        | reddish <input type="checkbox"/> <input type="checkbox"/> black <input checked="" type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> |                                 | other* <input type="checkbox"/>                                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
| Thickness                                                         |                                                        |                                                                                                                                                                    |                                 |                                                                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
| 0.163                                                             |                                                        |                                                                                                                                                                    |                                 |                                                                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
| Inclusions                                                        |                                                        |                                                                                                                                                                    |                                 |                                                                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                                | chalk                                                                                                                                                              | iron pan                        | manganese                                                                | charcoal                            | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                             | coarse stone             |
| frequency                                                         |                                                        |                                                                                                                                                                    |                                 |                                                                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
| bulk find                                                         | <input type="checkbox"/>                               | <input type="checkbox"/>                                                                                                                                           | <input type="checkbox"/>        | <input type="checkbox"/>                                                 | <input 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 checked="" 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) ☐

POSSIBLE SPILT CONTENT OF P

### Basic process

| Sample nos | Find nos | Photo nos                                           | Drawing nos                                                                                                                                               | <input type="checkbox"/> construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse |
|------------|----------|-----------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| S161.86    | F16301   | 1610560<br>1610561<br>1610571<br>1610572<br>1610573 | Surveyed:<br>plan <input checked="" type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 1619 B<br>D 1619 ? | Date 4.1.18<br>Initials RH CS<br>Checked by                                                                   |

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

# ADDITIONAL INFORMATION

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

FILL OF PIT CUT INTO NARROW DITCH CONTAINING COMPLETE  
BRONZE AGE VESSEL.  
FILL POSSIBLY MADE UP CONTENTS OF VESSEL (161269).  
CHARCOAL AND CRUDE FLINT PEBBLE INCLUSIONS  
~~AND~~ SMALL PIECES OF BONE IN THE  
FILL INDICATE A CREMATION.

Refer to context

161267

## 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<br>161269                                                                                    |
| ECB#      | Subgroup   | Parent context<br>161267 | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |        |        |  |                 |
|--|--|--------|--------|--|-----------------|
|  |  |        |        |  | Same as context |
|  |  | 161269 |        |  | Cuts context    |
|  |  | 161268 | F16301 |  | 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<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 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<br>greyish <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> red<br>blueish <input type="checkbox"/> blue | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input checked="" type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>0.11                                                                                                                                                                                                                        | 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                                                                                                                                                  |
|            | F16301    | 1610560<br>1610561<br>1610571<br>1610572<br>1610573<br>1610574<br>1610575<br>1610576 | #17<br>Surveyed:<br>plan <input checked="" type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16198<br>D16197 |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date 4.1.18                                                                                                   |
| Initials CS RH                                                                                                |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

FILL OF VESSEL FIG 301.

POSSIBLE CREMATION \* CONTAINED IN COMPLETE  
BRONZE AGE VESSEL.

CONTEXT LEFT IN VESSEL FOR OFF SITE

~~ANALYSIS~~ ANALYSIS.

## SKETCHES

Refer to context

161267

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

**MOLA HEADLAND**  
INFRASTRUCTURE



## CONTEXT SHEET

|                  |                      |                            |                                                                                                                        |
|------------------|----------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA 16 | Sub-area/Trench            | Context number<br>[61270]                                                                                              |
| ECB #            | Subgroup             | Parent context<br>[161270] | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161271) |  |  | Same as context |
|  |  | (161270) |  |  | Cuts context    |
|  |  | (161003) |  |  | Cut by context  |

**CUT**

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

**DESCRIPTION**

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">  <input type="checkbox"/> vertical<br/>  <input type="checkbox"/> steep<br/>  <input type="checkbox"/> moderate<br/>  <input type="checkbox"/> gentle<br/>  <input type="checkbox"/> stepped<br/>  <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="margin-left: 10px;">           sloping         </div> </div> |                   | <b>Base</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">  <input type="checkbox"/> flat<br/>  <input type="checkbox"/> concave<br/>  <input type="checkbox"/> v-shaped<br/>  <input type="checkbox"/> sloping<br/>  <input type="checkbox"/> uneven<br/> <input type="checkbox"/> complex*         </div> </div> |                 |
| <b>Dimensions</b><br>In metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Length</b><br>13.5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Width</b><br>3 | <b>Depth</b><br>1.4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <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

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

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

### CROSS REFERENCE

|                     |                    |                                 |                                                                                                                                                          |
|---------------------|--------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><br>/ | Finds nos<br><br>/ | Photo nos<br>1610581<br>1610582 | Drawing nos SHEET 18<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16199 |
|---------------------|--------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☒ use ☐ disuse ☐

Date 09 01 11

Initials DD

Checked by

# ADDITIONAL INFORMATION

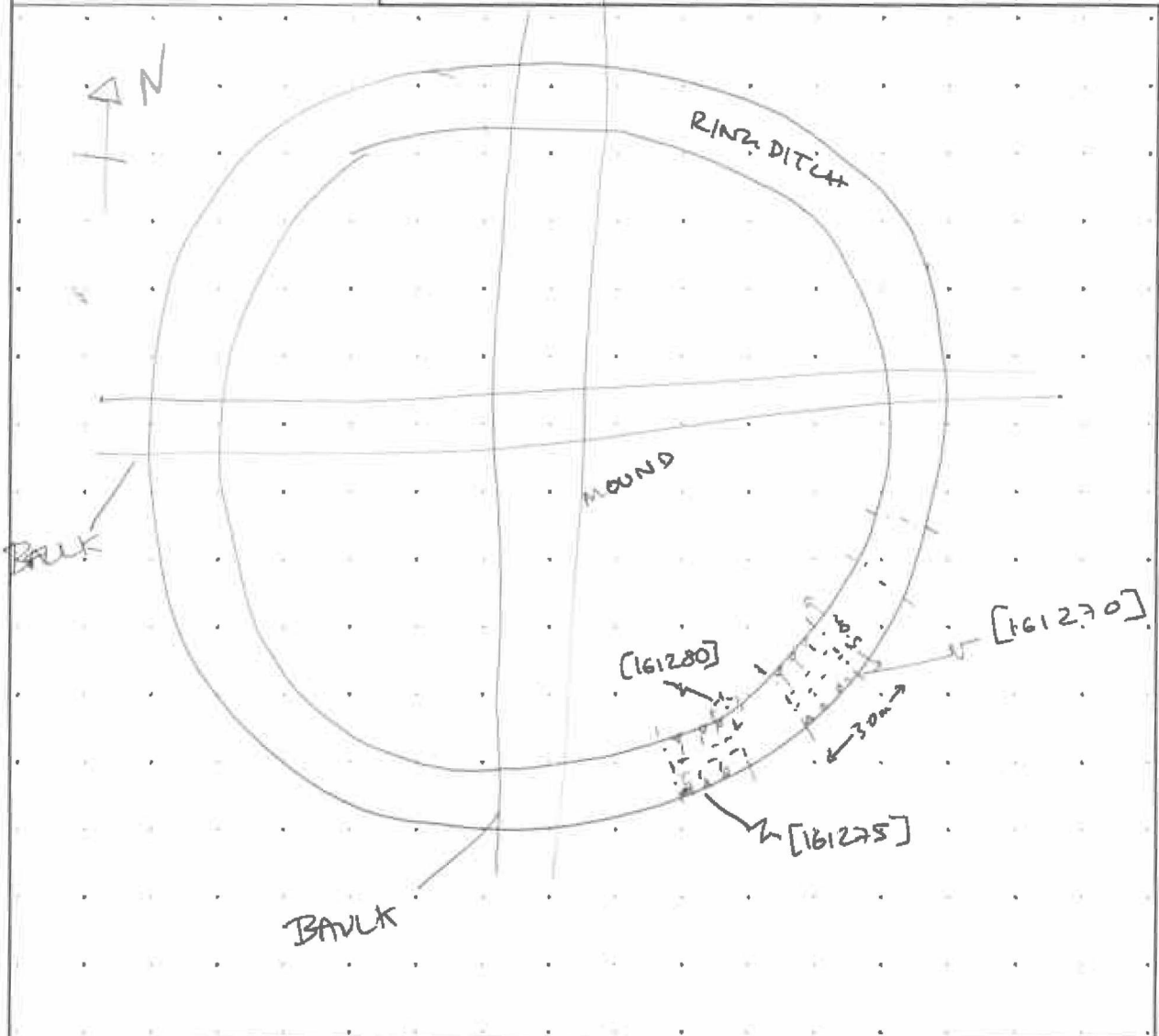
(any further details that may be important for understanding the context, including items marked \*overleaf)

SIT IN RING DITCH ASSOCIATED WITH BRONZE AGE  
 ROUND BARROW, IN THE SOUTH EAST QUADRANT.  
 STEEP SIDES AND CONCAVE BASE  
 FIVE FILL WITH FINDS INCLUDING PREHISTORIC  
 POT AND FLINT.

Refer to context (161274)

## 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>TE ALB</b> | Sub area/Trench                    | Context number<br><b>(16127#1)</b>                                                                                     |
| ECB #                   | Subgroup                    | Parent context<br><b>[16127#2]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                  |  |  |                 |
|--|--|------------------|--|--|-----------------|
|  |  | <b>(16156)</b>   |  |  | Same as context |
|  |  | <b>(16127#1)</b> |  |  | Cuts context    |
|  |  | <b>(16127#2)</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>(N)                                                                                                                   | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## 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 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 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>0.44</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>M</b>                                                                                                                                                                   | 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"/> <input type="checkbox"/>                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|                             |                        |                                |                                                                                                                                                                        |
|-----------------------------|------------------------|--------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos.<br><b>16194</b> | Finds nos.<br><b>/</b> | Photo nos.<br><b>1610581-2</b> | Drawing nos. <b>SHEET 18</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>16199</b> |
|-----------------------------|------------------------|--------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>09/1/18</b>                                                                                           |
| Initials <b>DD</b>                                                                                            |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

NATURAL INFILLING - TOP FILL OF CL61270]  
SLOPING IN FROM THE NORTH - SIDE OF FLOODING  
JUST ... US. MOST LIKELY BROWN MATERIAL THAT  
HAS MOVED DOWN:

Refer to context

## SKETCHES

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

[161270] - SKETCH PLAN

[161274] - SECTION



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                            |                                   |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench                   | Context number<br><b>(161273)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>(161270)</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161274)</b> |  |  | Same as context |
|  |  | <b>(161273)</b> |  |  | Cuts context    |
|  |  | <b>(161272)</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"/>                                       |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### 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 checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input checked="" type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><b>0.31</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"/> 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"/> CIP <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

|                            |                       |                                  |                                                                                                                                        |
|----------------------------|-----------------------|----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>16193</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610581 - 82</b> | Drawing nos<br><b>Sketch 18</b>                                                                                                        |
|                            |                       |                                  | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>16199</b> |

### Basic process

construction ☐ use ☒ disuse ☐

Date **09/11/18**

Initials

Checked by



# ADDITIONAL INFORMATION

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

NATURAL INFILLING OF [161270]. A PURELY CLAY  
LAYER THAT MOST LIKELY WASHEO IN.  
NO FINDS, OCCASIONAL UTILITY LENSES -  
THAT APPEAR DUE TO THE SEDIMENTATION.

Refer to context

## SKETCHES

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

[161270] - SKETCH PLAN

~~161274~~

(161274) - SECTION.

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                                   |                                                                                                             |
|-------------------------|-----------------------------|-----------------------------------|-------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench                   | Context number<br><b>(161272) (161273)</b>                                                                  |
| ECB #                   | Subgroup                    | Parent context<br><b>[161270]</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161272)</b> |  |  | Same as context |
|  |  | <b>(161273)</b> |  |  | Cuts context    |
|  |  | <b>(161274)</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 checked="" 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<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>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                  |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input 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 type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                   | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input checked="" type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><b>0.40</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>0</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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| bulk find <input type="checkbox"/>                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|                             |           |                                  |                                                                                                                                                                 |
|-----------------------------|-----------|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S16192</b> | Finds nos | Photo nos<br><b>1610581 - 82</b> | Drawing nos<br><b>31667 1-8</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/><br><b>D16199</b> |
|-----------------------------|-----------|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☐ disuse ☐

Date **07/01/18**

Initials **DD**

Checked by

# ADDITIONAL INFORMATION

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

NATURAL INFILLING OF ~~ST~~ (161270) &

~~ST~~ FINDS INCLUDED POT FROM BROWN AGE, AND SOME LITHICS. MOTTLED FIL WITH IRON STAINING

THIS FIL IS SEEN AROUND THE ENTIRE DITCH SO ~~WHICH~~ EITHER IS RELATED TO THE DITCH-REVIOUSLY BEING USED AS ANOTHER FEATURE. THE IRON STAINING ALSO INDICATES THAT THERE MAY HAVE BEEN A LOT OF STANDING WATER SITTING IN THE DITCH BEFORE IT INFILLED WITH (161272) & (161271)

Refer to context

## SKETCHES

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

(161270) SKETCH PLAN

(161274) SECTION

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA 16     |                 | C161274                                                                                                |
| ECB#      | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | C161270         | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |         |  |  |                 |  |
|--|--|---------|--|--|-----------------|--|
|  |  | C161273 |  |  | Same as context |  |
|  |  | C161274 |  |  | Cuts context    |  |
|  |  | C161270 |  |  | 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 checked="" 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<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> |
| in metres                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                               |               |                                                                                                                                                                                                                    |              |
| <b>Shape result of (tick all that apply)</b>                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                               |               |                                                                                                                                                                                                                    |              |
| 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

|                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| <b>Compaction</b>                                                                                                                                                |                          | <b>Colour</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                          | <b>Composition</b>                                                                                                                                                                                                                                                                                                                                       |                          |
| <input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> 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 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"/> |                          |
| <b>Thickness</b>                                                                                                                                                 |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                          |                          |
| 0.1                                                                                                                                                              |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          |                                                                                                                                                                                                                                                                                                                                                          |                          |
| <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"/> |

- ☐ 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 |
| S16191                                                                                                      | /         | 1610581-82 | SHEET 18    |
| Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |           |            |             |
| D16199                                                                                                      |           |            |             |

## Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date: 09/11/18                                                                                                           |
| Initials: DD                                                                                                             |
| Checked by:                                                                                                              |

# ADDITIONAL INFORMATION

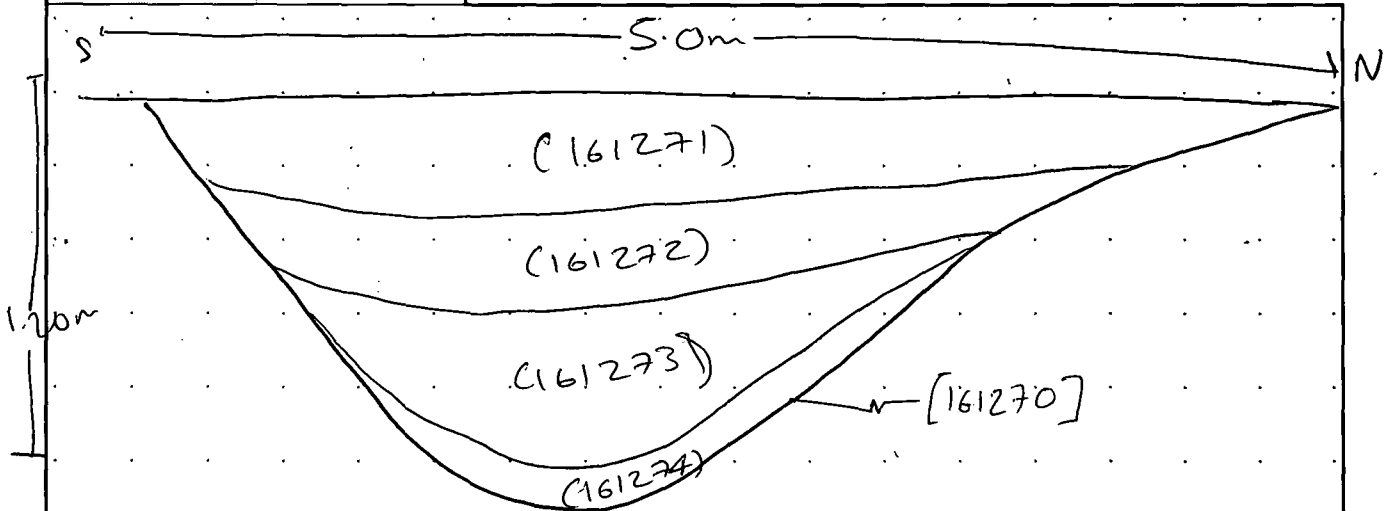
(any further details that may be important for understanding the context, including items marked \* overleaf)

NATURAL INFILLING AT THE BASE OF THE SUE.  
NO FINDS: MOST LIKELY TO BE A REDISTRIBUTED  
NATURAL THAT OCCURRED ~~WHILE~~ WHILE THE DITCH WAS  
STILL IN USE.

Refer to context [161270]

## SKETCHES

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



# MOLA HEADLAND INFRASTRUCTURE



AFRM16  
A14 TEA16  
ECB5052

## CONTEXT SHEET

|                         |                            |                                 |                                                                                                                        |
|-------------------------|----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>—</b>     | Context number<br><b>161275</b>                                                                                        |
| ECB#                    | Subgroup                   | Parent context<br><b>161275</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |               |               |                       |
|--|---------------|---------------|-----------------------|
|  | <b>161276</b> | <b>745000</b> | Same as context       |
|  | <b>161275</b> |               | Cuts context          |
|  | <b>161003</b> |               | Cut by context 161280 |

### 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 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<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>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><b>3 m</b>                                                                                                                                                                                                                                                                            | <b>Width</b><br><b>4.65</b>                                                                                                                                                                                                                              | <b>Depth</b><br><b>1.45</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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <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                                                                                     | <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

|            |           |                                                       |                                                                                                                                                        |
|------------|-----------|-------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos<br>1610577<br>1610578<br>1610579<br>1610580 | Drawing nos<br># 19<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>16200 |
|------------|-----------|-------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☐ use ☐ disuse ☐

Date 11.1.18

Initials RM AN

Checked by

# ADDITIONAL INFORMATION

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

LARGE BARROW & DITCH CUT BY POST HOLE.

SOUTHERN EDGE HAS CONSISTANT SLOPE WHILE NORTH EDGE CUT BY [161280]

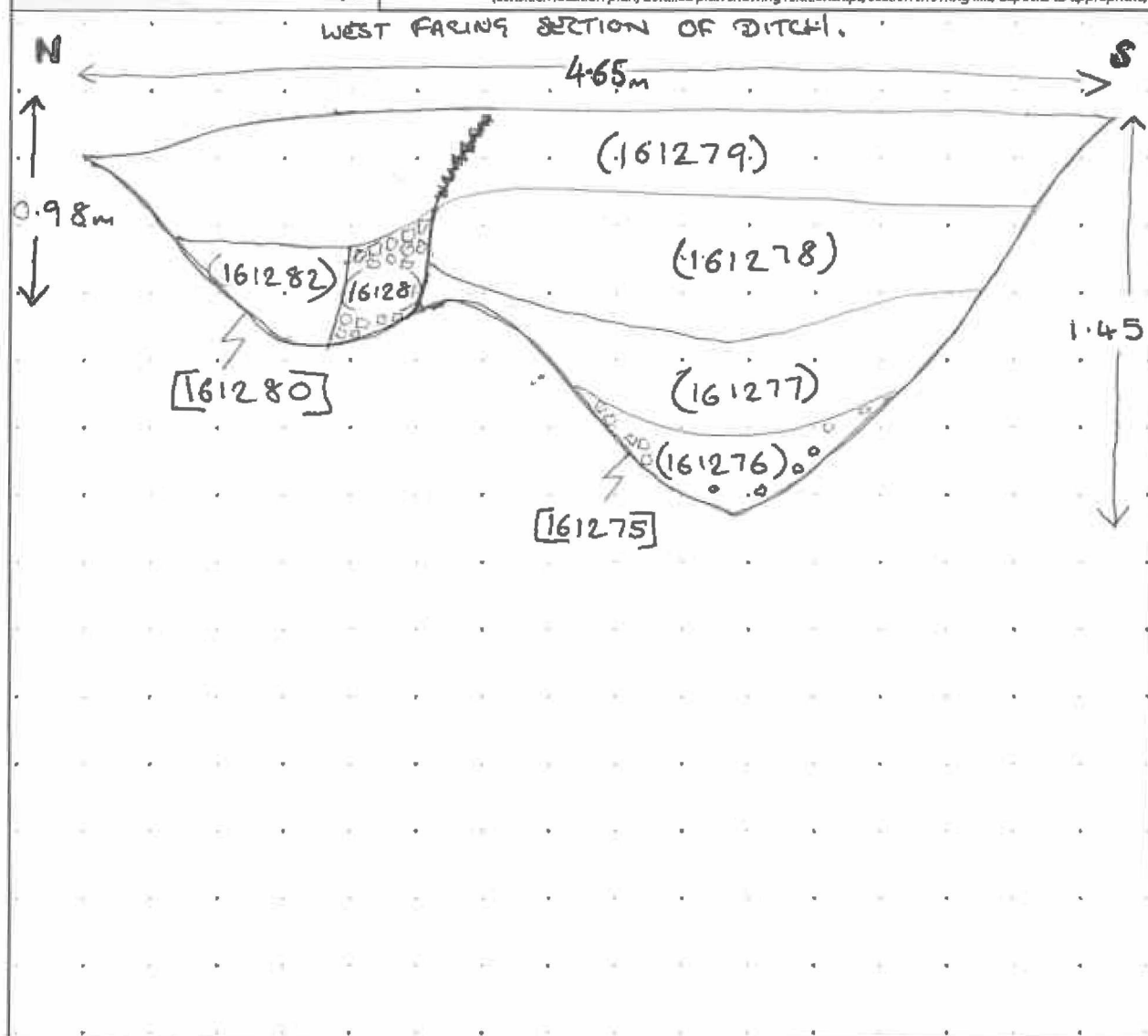
PLAN OF DITCH SECTION DRAWN ON (161276)

BLOT IS IN SOUTH EAST QUADRANT OF THE BARROW DITCH.

Refer to context 1612 ~~77~~ 76

## 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 16     | —               | (161276)                                                                                               |
| ECB.#     | Subgroup   | Parent context  | Context type                                                                                           |
| —         | —          | {161275}        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (161277) |  |  | Same as context | ✓ |
|  |  | (161276) |  |  | Cuts context    | ✓ |
|  |  | (161275) |  |  | Cut by context  | ✓ |

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

## INTERPRETATION

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

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

## INTERPRETATION

[illegible]

### Basic process

| Sample nos | Finds nos | Photo nos  | Drawing nos                                                                                                                      | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|------------|-----------|------------|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
|            |           | 1610577-80 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16206 | Date 11.01.18<br>Initials AM.RH<br>Checked by                                                                 |

# ADDITIONAL INFORMATION

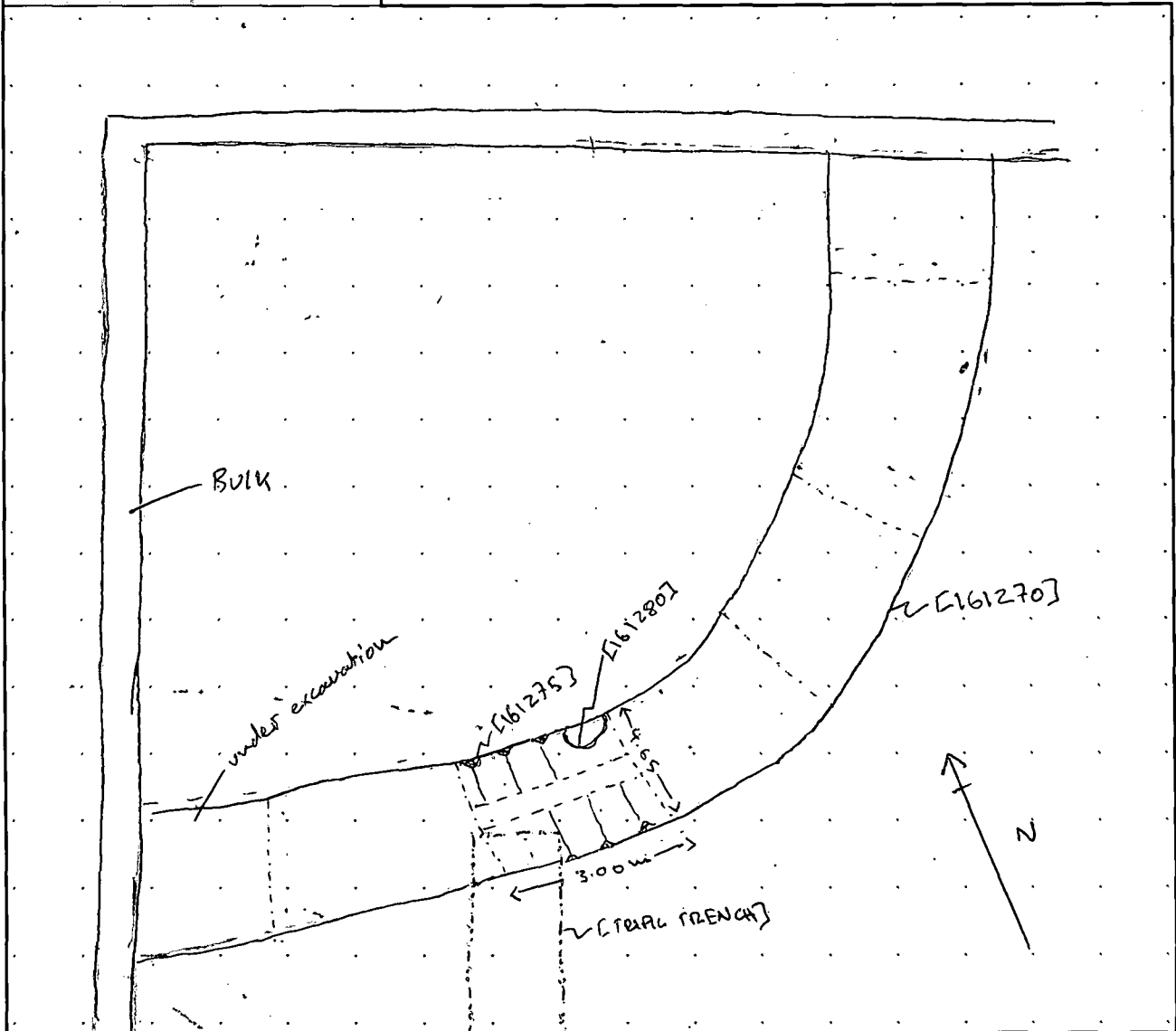
(any further details that may be important for understanding the context, including items marked \* overleaf)

first fill of ring ditch, covering the base.  
likely to be re-deposited material off the sides, infilled either  
during the ditch's construction or soon after.  
Sterile of any significant inclusions or archaeological  
material.  
Covered by a silting layer (161277).

Refer to context [161275].

## SKETCHES

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



## STRATIGRAPHY

|  |  |          |  |  |                 |        |
|--|--|----------|--|--|-----------------|--------|
|  |  | (161278) |  |  | Same as context | 161272 |
|  |  | (161277) |  |  | Cuts context    |        |
|  |  | (161276) |  |  | Cut by context  | 161280 |

(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><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 type="checkbox"/> |
|------------|-----------|-----------|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
|            |           | 1610577   | Surveyed:                                                                                                 | Date 11/1/18<br>Initials RH AN<br>Checked by                                                       |
|            |           | 1610578   | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |                                                                                                    |
|            |           | 1610579   |                                                                                                           |                                                                                                    |
|            |           | 1610580   | 16200                                                                                                     |                                                                                                    |

# ADDITIONAL INFORMATION

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

~~BROWN GREY~~

GREYISH BLUE ~~CLAY~~ ~~CLAY~~ CLAYEY SILT FILL  
OF BARROW DITCH. THIS LOWER FILL APPEARS  
TO HAVE FORMED DUE TO NATURAL INFILLING  
OVER TIME. EVIDENCE OF ROOTING AND  
~~ORGANICS~~ ORGANICS IN THIS FILL ALL WITH GRAVEL  
INCLUSIONS.

Refer to context

161275  
161276

## 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>TEA16</b> | Sub-area/Trench<br><b>—</b>     | Context number<br><b>(161278)</b>                                                                                      |
| ECB#<br><b>—</b>        | Subgroup<br><b>—</b>       | Parent context<br><b>161275</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                                 |
|--|--|-----------------|--|--|---------------------------------|
|  |  | <b>(161279)</b> |  |  | Same as context <b>(161273)</b> |
|  |  | <b>(161278)</b> |  |  | Cuts context                    |
|  |  | <b>(161277)</b> |  |  | Cut by context <b>161280</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<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 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 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"/><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"/> | <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>0.50m</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 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 checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |                                          |                                                                                                                                                |
|------------|-----------|------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                | Drawing nos                                                                                                                                    |
|            |           | 1610577<br>1610578<br>1610579<br>1610580 | 1610<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>16200</b> |

## Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>11.11.18</b>                                                                                                     |
| Initials <b>RH AN</b>                                                                                                    |
| Checked by                                                                                                               |

# ADDITIONAL INFORMATION

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

NATURAL INFILLING OF [161275]  
 SILTY CLAY FILL SOME GRAVEL  
 INCLUSIONS. POSSIBLE BANK OF BARROW  
 DITCH ERODED INTO DITCH.  
~~BAR~~ WORKED FLINT FOUND IN FILL

Refer to context 161276  
 161275

## 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 16</b> | Sub-area/Trench<br><b>/</b> | Context number<br><b>161279</b>                                                                             |
| ECB#<br><b>/</b>        | Subgroup<br><b>/</b>        | Parent context<br><b>/</b>  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>161002</b>   |  |  | Same as context |
|  |  | <b>(161279)</b> |  |  | Cuts context    |
|  |  | <b>(161278)</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>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 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"/> 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 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>MAX <b>0.48m</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>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

|            |           |                                          |                                                                                                                                         |
|------------|-----------|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photom nos                               | Drawing nos                                                                                                                             |
|            |           | 1610577<br>1610578<br>1610579<br>1610580 | # 19<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>16200 |

### Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>11.1.18</b>                                                                                |
| Initials <b>RH AN.</b>                                                                             |
| Checked by                                                                                         |

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



# ADDITIONAL INFORMATION

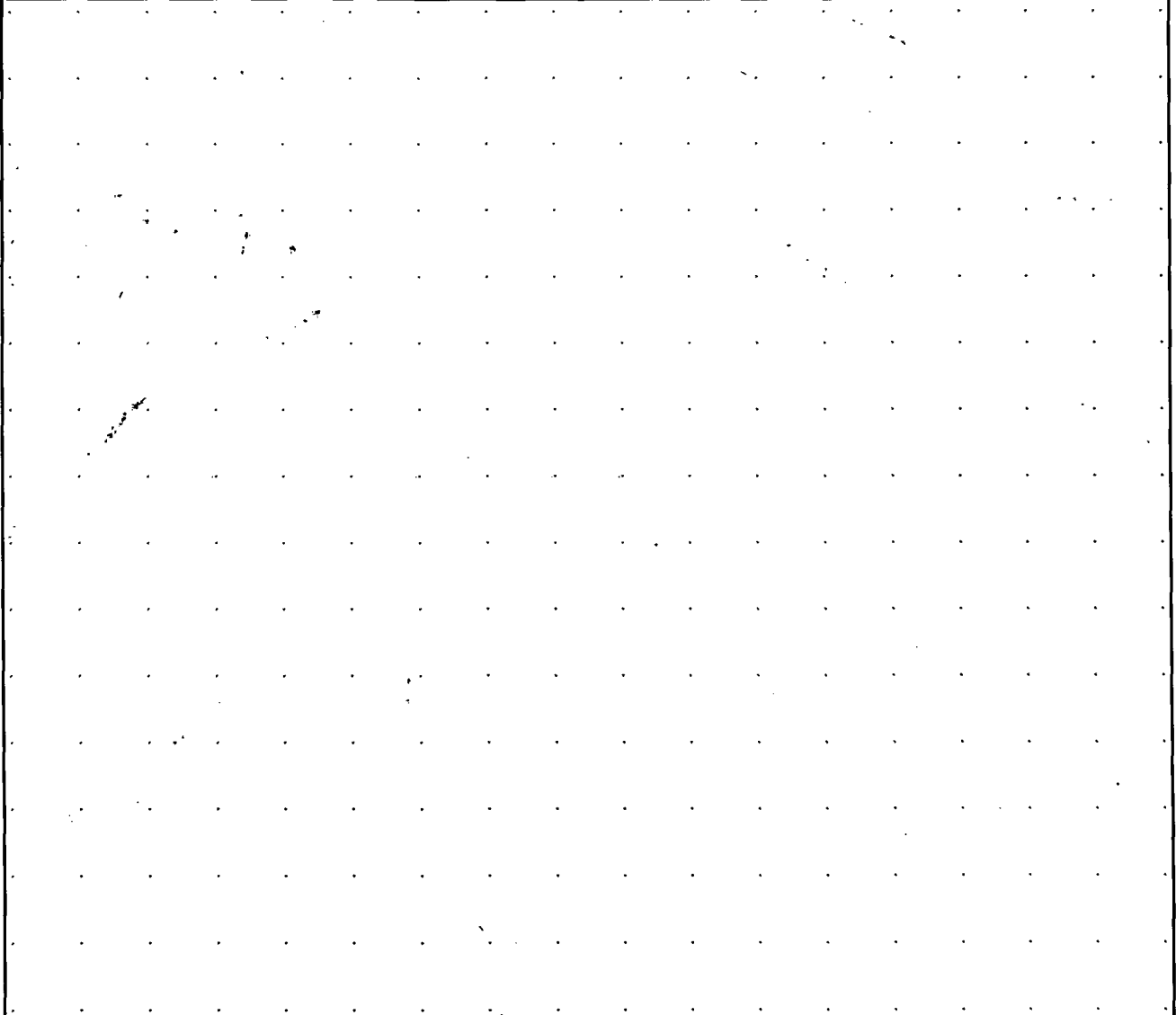
(any further details that may be important for understanding the context, including items marked \* overleaf)

TOP FILL OF BARROW DITCH PROBABLY FORMED BY NATURAL INFILLING. FILL FORMED AFTER POST HOLE [161280] WAS ~~PUT~~ ~~ON~~ ~~FOR~~ NO LONGER IN USE. FINDS INCLUDE ~~1~~ STRUCK FLINT AND PREHISTORIC POTTERY.

Refer to context: 161275  
161276

## SKETCHES

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



# MOLA HEADLAND INFRASTRUCTURE



A FRM16  
A14 TEA16  
ECB5052

## CONTEXT SHEET

|                  |                      |                            |                                                                                                                        |
|------------------|----------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA 16 | Sub-area/Trench<br>—       | Context number<br>[161280]                                                                                             |
| ECB #<br>—       | Subgroup<br>—        | Parent context<br>[161280] | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                       |
|--|--|----------|--|--|-----------------------|
|  |  | (161281) |  |  | Same as context —     |
|  |  | (161280) |  |  | Cuts context (161278) |
|  |  | (161278) |  |  | Cut by context —      |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                          |                        |                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                          |                        |                           | pit <input type="checkbox"/><br>post-hole <input checked="" type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |  |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>H <input type="checkbox"/> E-W<br>X <input type="checkbox"/> NE-SW<br>X <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                                 | <b>Sides</b><br>L <input checked="" type="checkbox"/> vertical<br>L <input checked="" type="checkbox"/> steep<br>L <input type="checkbox"/> moderate sloping<br>L <input type="checkbox"/> gentle<br>L <input type="checkbox"/> stepped<br>L <input type="checkbox"/> undercutting<br>L <input type="checkbox"/> complex* | <b>Base</b><br>— <input type="checkbox"/> flat<br>U <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>Width</b><br>—                                                                                                                                                                                                                                        | <b>Depth</b><br>0.55 m | <b>Diameter</b><br>0.95 m |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| <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"/> | 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<br>frequency<br>bulk find                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| stones*<br>chalk<br>iron pan<br>manganese<br>charcoal<br>plant remains*<br>wood<br>marine shell<br>bone*<br>pot<br>fired clay / CBM<br>CTP<br>mortar/plaster<br>leather/textile<br>glass<br>metal<br>industrial waste<br>lithics<br>coarse stone |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |

### CROSS REFERENCE

|                 |                |                                      |                                                                                                                                                             |
|-----------------|----------------|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>— | Finds nos<br>— | Photo nos<br>1610577<br>↓<br>1610580 | Drawing nos <b>f19</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 16200 |
|-----------------|----------------|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|

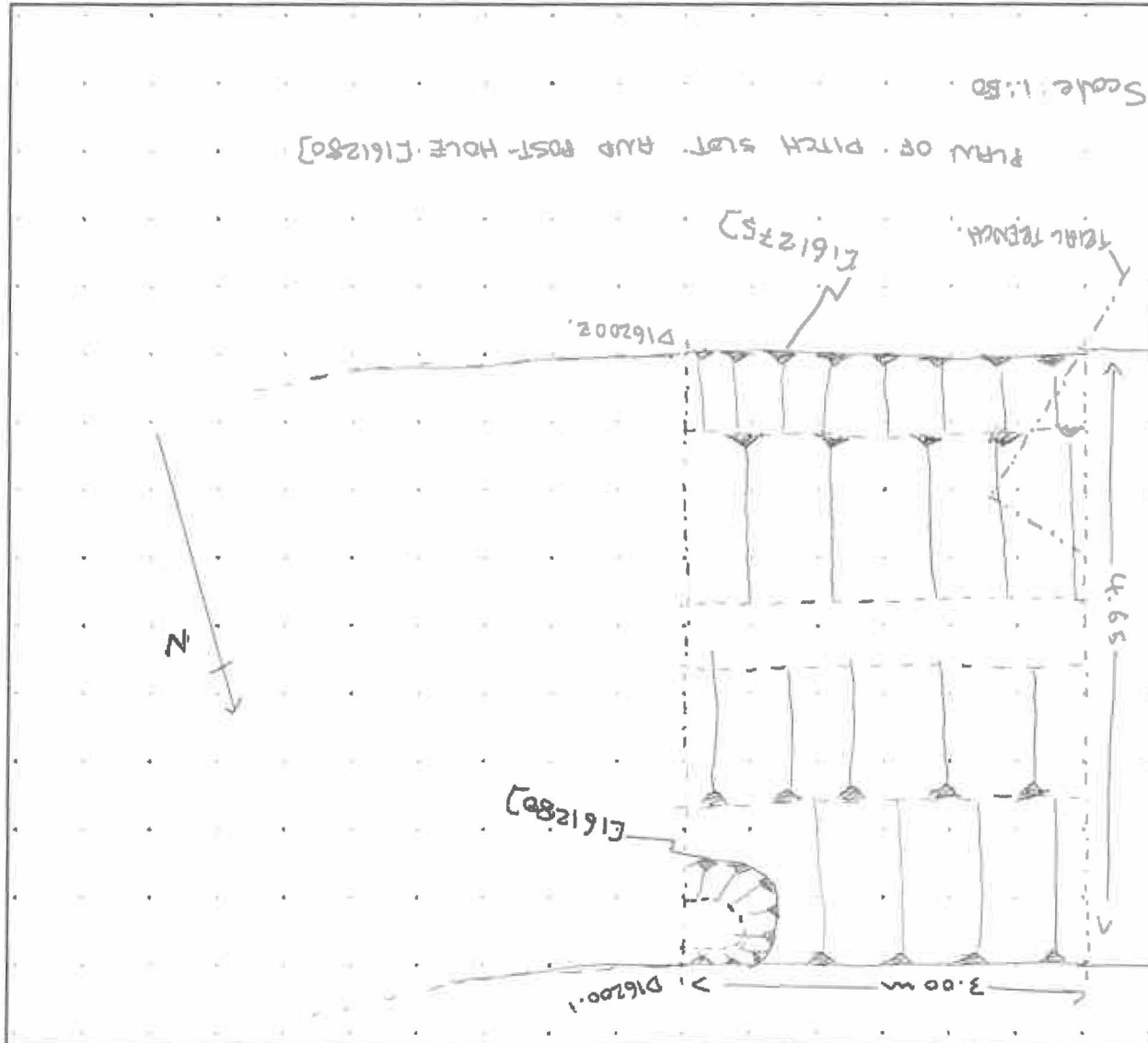
### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>11.01.18</b><br>Initials <b>AMR</b><br>Checked by                                                     |

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

Cut of a possible pest-hole, which truncates the three lower bills of ditch [161275].  
Capped by (161279) which contains bronze-age material.  
allowing us to also date the pest-hole to the bronze-age.  
It's got no other similar features have been found  
in the area, suggesting that it may not have been  
part of a larger feature

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       | TEA16      | —               | 161281                                                                                      |
| ECB#      | Subgroup   | Parent context  | Context type                                                                                |
| —         | —          | —               | cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 161279 |  |  | Same as context |
|  |  | 161281 |  |  | Cuts context    |
|  |  | 161280 |  |  | 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>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 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 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 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 checked="" type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |
| <b>Thickness</b><br>0.45m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 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 checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |                                          |                                                                                                                                        |
|------------|-----------|------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                | Drawing nos                                                                                                                            |
|            |           | 1610577<br>1610578<br>1610579<br>1610580 | #19<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>16200 |

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date: 11-18-18                                                                                     |
| Initials: RH AN                                                                                    |
| Checked by:                                                                                        |

# ADDITIONAL INFORMATION

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

GRAVEL FILL OF [161280] WHICH ~~IS~~ IS PACKED  
FIRMLY AGAINST THE SOUTHERN EDGE OF  
[161280]. FILL APPEARS TO BE PACKING  
OF A POST WHICH IS NO LONGER  
PRESENT.

Refer to context | 161275  
161276.

161280

(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>TEA 16</b> | Sub-area/Trench<br><b>—</b>     | Context number<br><b>161282</b>                                                                                        |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>        | Parent context<br><b>161280</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |        |  |  |                 |   |
|--|--|--------|--|--|-----------------|---|
|  |  | 161279 |  |  | Same as context | — |
|  |  | 161282 |  |  | Cuts context    | — |
|  |  | 161281 |  |  | 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>                                                                                                                                   | <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"/>                                       |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## 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 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"/> | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input checked="" type="checkbox"/> other fill/deposit (describe below) |
| <b>Thickness</b> 4-8<br>0.55 m                                                                                                                                                        | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency 0                                                                                                                                                                           | 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                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency 0                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|                        |                       |                                               |                                                                                                                                                                     |
|------------------------|-----------------------|-----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>—</b> | Finds nos<br><b>—</b> | Photo nos<br><b>1610577</b><br><b>1610580</b> | Drawing nos<br><b>16</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16206</b> |
|------------------------|-----------------------|-----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>19.01.18</b>                                                                                          |
| Initials <b>AM. PH.</b>                                                                                       |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

Material remaining after the removal of the rotting of the possible post-hole.

Bronze-Age in date, although no finds or significant inclusions were observed.

South edge is vertical against the packing layer (161281).

Refer to context

[161275]  
[161276]  
[161280]

## 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 16</b> | Sub-area/Trench<br><b></b>        | Context number<br><b>(161283)</b>                                                                                      |
| ECB.#<br><b></b>         | Subgroup<br><b></b>         | Parent context<br><b>[161284]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|                 |                 |                 |
|-----------------|-----------------|-----------------|
| <b>[161404]</b> | <b>[161283]</b> | Same as context |
| <b>[161284]</b> | <b>[161404]</b> | Cuts context    |
| <b>[161284]</b> | <b>[161404]</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                                                                                                                               |  | <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>                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                            |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" 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"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat |                          | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input 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 checked="" type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b><br><b>0.72-1.3</b>                                                                                                                                                   |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                            |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                            |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                             | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                 | manganese                                                                                                                                                                                                                                                                  | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains*           | wood                     | marine shell             | bone*                               | pot                                 | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                   | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## CROSS REFERENCE

|                            |                                              |                                                            |                                                                                                                                                                                       |
|----------------------------|----------------------------------------------|------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>16201</b> | Finds nos<br><b>SF 16119</b><br><b>16302</b> | Photo nos<br><b>1610597</b><br><b>To</b><br><b>1610602</b> | Drawing nos<br><b>16201-#15</b><br>Surveyed: <b>16203-#18</b><br>plan <input checked="" type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|----------------------------|----------------------------------------------|------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>25.1.18</b>                                                                                           |
| Initials <b>CV</b>                                                                                            |
| Checked by <b></b>                                                                                            |

# ADDITIONAL INFORMATION

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

## FILL OF CREMATION

ITS COLOR WAS BLACK BROWN-REDDISH WITH A CLAY-SILTY TEXTURE.

THERE WAS SOME SMALL FRAGMENTS OF BONES

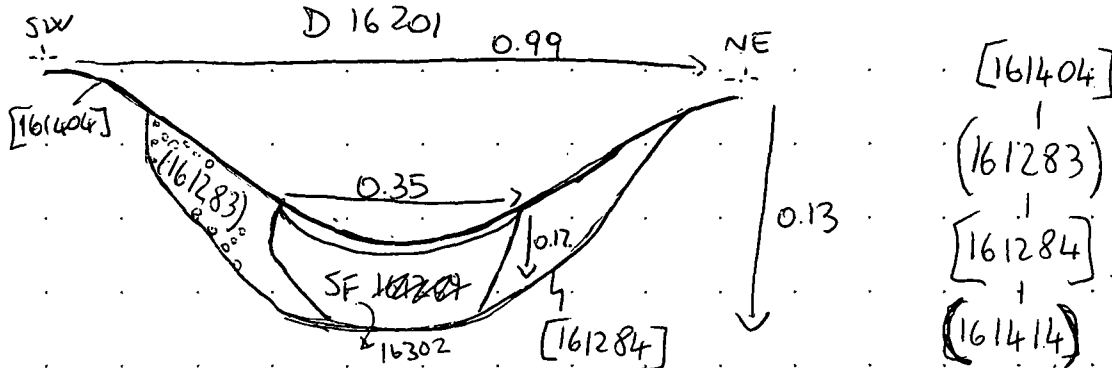
THE FILL WAS IN A VESSEL OF POT [LENGTH 0.35, WIDTH 0.25, DEPTH 0.12]

THE RIM AND THE HIGHER PART OF THE BODY HAVE COLLAPSED LEAVING ONLY THE BOTTOM OF THE POT.

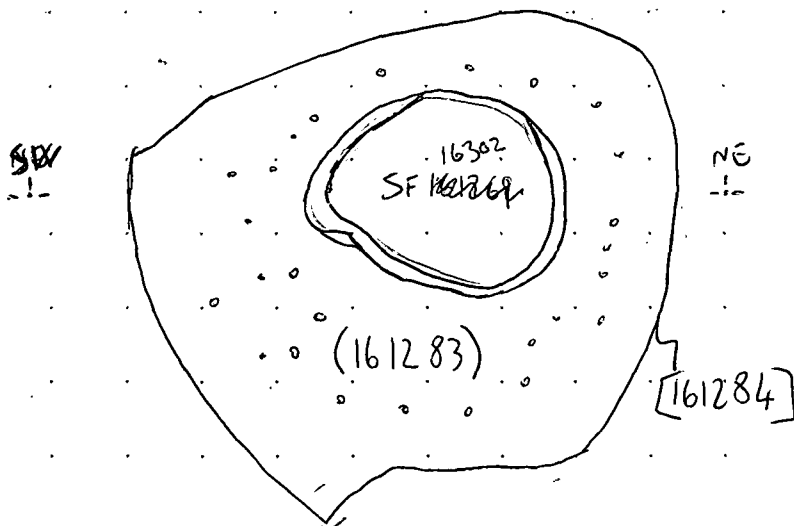
## SKETCHES

Refer to context 161284  
161407

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



D 16203



# MOLA HEADLAND INFRASTRUCTURE



AFRM16  
A14 TEA16  
ECB5052

## CONTEXT SHEET

|                   |                      |                          |                                                                                                                        |
|-------------------|----------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A 14 | Area/Field<br>TEA 16 | Sub-area/Trench          | Context number<br>161284                                                                                               |
| ECB #             | Subgroup             | Parent context<br>161284 | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |        |
|--|--|----------|--|--|-----------------|--------|
|  |  | (161283) |  |  | Same as context | /      |
|  |  | (161284) |  |  | Cuts context    | 161284 |
|  |  | (161414) |  |  | 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 checked="" 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 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>                                                                                                                                                                                                                                                                                          | <b>Width</b>                                                                                                                                                                                                                                             | <b>Depth</b><br>0.13 | <b>Diameter</b><br>0.72 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <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>blue <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<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 / CB <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"/> lithic <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>1610597<br>TO<br>1610602 | Drawing nos 16201-#15<br>Surveyed: 16203-#18<br>plan <input checked="" type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|-----------------|----------------|---------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date 25.1.18                                                                                       |
| Initials CV                                                                                        |
| Checked by                                                                                         |

# ADDITIONAL INFORMATION

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

## BURIAL CUT

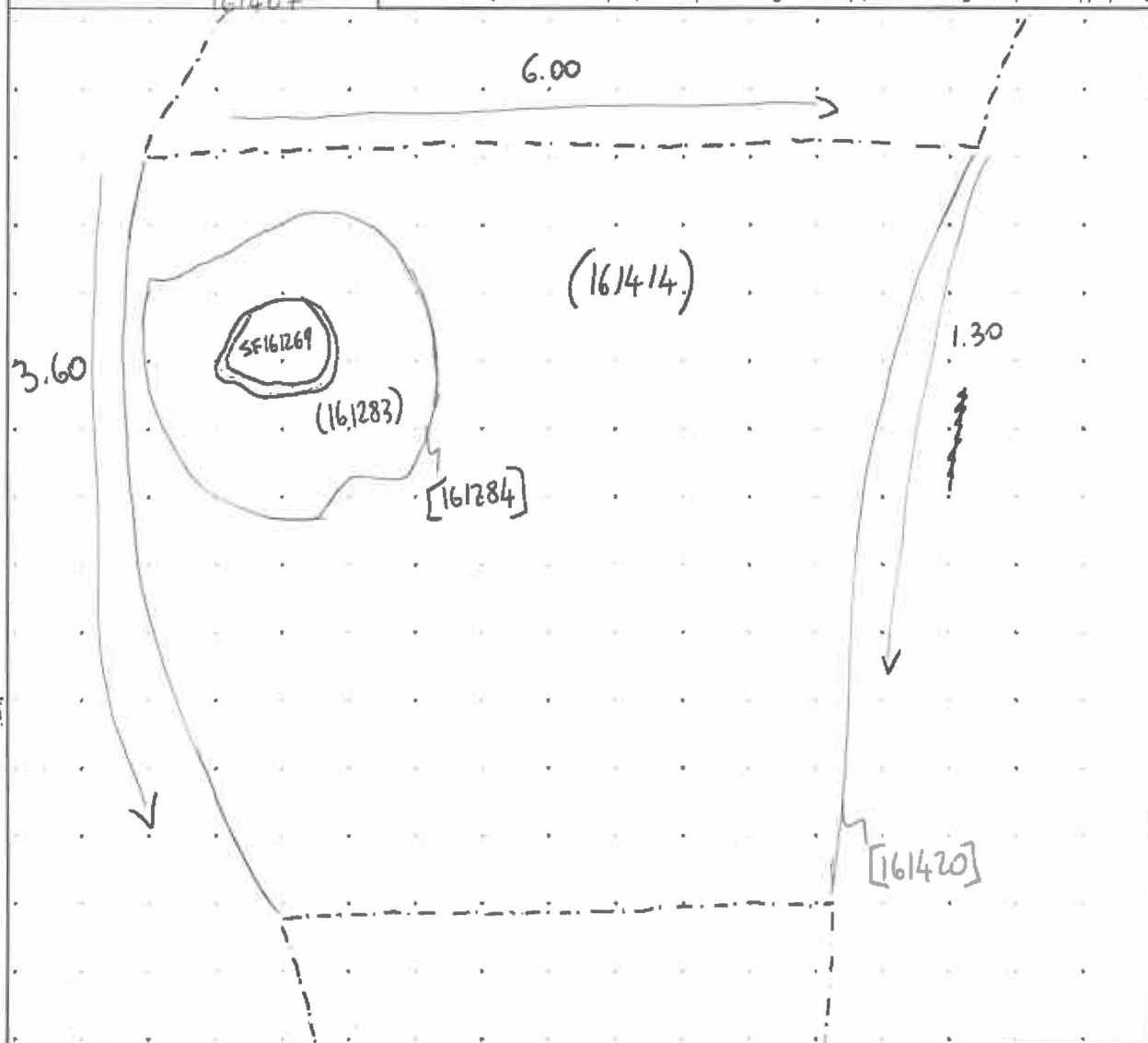
IT WAS INSIDE A DICH. ITS POSITION CAN ~~BE~~ PROBABLY, BE CONNECTED TO OTHER CREMATIONS, OF WHICH THREE W VESSEL, FOUND A LITTLE FURTHER NORD. IT CONTAINED, INDEED, A CREMATION IN VESSEL OF POT

Refer to context

(161283)  
161407

## 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 16 BNOS</b> | Sub-area/Trench                 | Context number<br><b>161285</b>                                                                                        |
| EGB #                   | Subgroup                         | Parent context<br><b>161287</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |   |
|--|--|---------------|--|--|-----------------|---|
|  |  | <b>161107</b> |  |  | Same as context | / |
|  |  | <b>161285</b> |  |  | Cuts context    | / |
|  |  | <b>161286</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<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 checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/>                                                                                                                                                      | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input 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>0.22-0.11m</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>bulk find                                                                                                                                                                | 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 checked="" 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"/> |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|                                           |                |                                                       |                                                                                                                                                                              |
|-------------------------------------------|----------------|-------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S16195</b><br><b>202</b> | Finds nos<br>/ | Photo nos<br><b>100-0687-690</b><br><b>100-0695-7</b> | Drawing nos <b># 19</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D.16202 sheet 19</b> |
|-------------------------------------------|----------------|-------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>11.1.18</b>                                                                                           |
| Initials <b>KF</b>                                                                                            |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

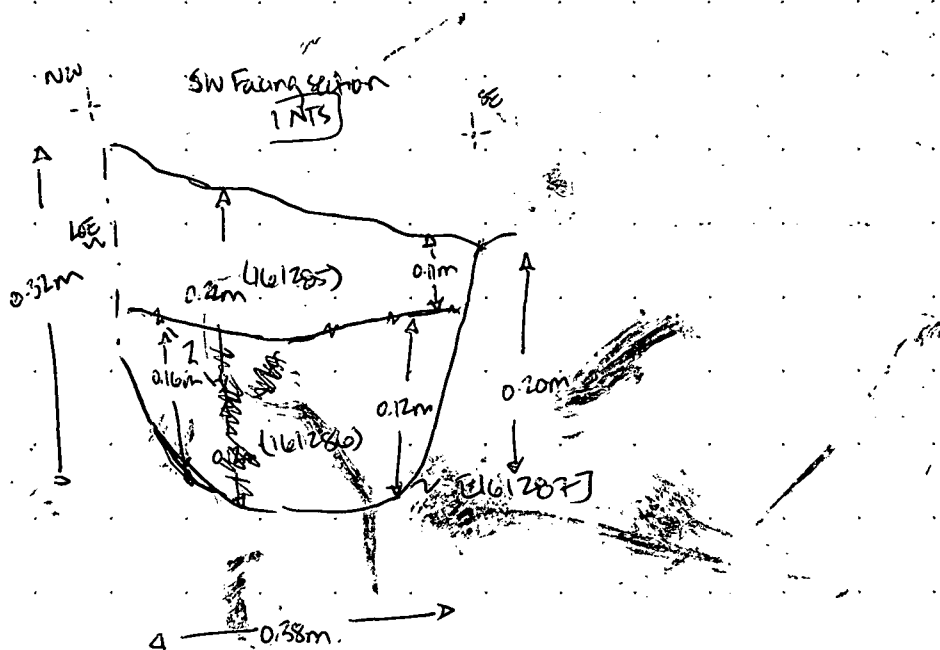
This is a secondary fill of ?posthole cut [161287]. Surrounding the cut is a sandy layer or deposit, and it's highly likely that this represents a natural infilling of the posthole cut, as the fill is composed of a mix of sand (~70%) + charcoal (~30%). Any pot recovered appears to be degrading.

Refer to context

161287

## 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>BNOS TEA 16</b> | Sub-area/Trench<br><b>1</b>     | Context number<br><b>161286</b>                                                                                        |
| ECB #                   | Subgroup                         | Parent context<br><b>161287</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |   |
|--|--|---------------|--|--|-----------------|---|
|  |  | <b>161285</b> |  |  | Same as context | / |
|  |  | <b>161286</b> |  |  | Cuts context    | / |
|  |  | <b>161287</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>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 (firm)<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<br>greyish <input checked="" type="checkbox"/> grey<br>orangeish <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> red<br>blueish <input type="checkbox"/> blue | <b>Composition</b><br>clayey <input checked="" 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>0.16 0.12m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | black <input checked="" type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                         | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| stones* <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 <b>0 0</b><br>bulk find <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |

## CROSS REFERENCE

|                                           |           |                                                        |                                                                                                                                                                            |
|-------------------------------------------|-----------|--------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S16196</b><br><b>20L</b> | Finds nos | Photo nos<br><b>100-0657-1910</b><br><b>100-0655-7</b> | Drawing nos <b>19</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D.16202 sheet 19</b> |
|-------------------------------------------|-----------|--------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>11.1.18</b>                                                                                           |
| Initials <b>W</b>                                                                                             |
| Checked by                                                                                                    |

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



# ADDITIONAL INFORMATION

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

This is the 1<sup>o</sup> fill of poss. posthole cut - [161287] - It is quite black suggesting that there is a high charcoal/ash composition, although no charcoal fragments are observed in the section.

Humic fill

Refer to context 161285, 161287

## SKETCHES

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

see (161285)

# MOLA HEADLAND INFRASTRUCTURE



AFRM16  
A14 TEA16  
ECB5052

## CONTEXT SHEET

|                         |                                     |                                 |                                                                                                                        |
|-------------------------|-------------------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>EN05 T&amp;P16</b> | Sub-area/Trench<br><b>/</b>     | Context number<br><b>161287</b>                                                                                        |
| ECB #                   | Subgroup                            | Parent context<br><b>161287</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                |  |  |                          |
|--|--|----------------|--|--|--------------------------|
|  |  | <b>161286</b>  |  |  | Same as context <b>/</b> |
|  |  | <b>161287</b>  |  |  | Cuts context             |
|  |  | <b>161005?</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 checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                          |                              |                                 | pit <input type="checkbox"/><br>post-hole <input checked="" type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>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>[ <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>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>                                                                                                                                                                                                                                                                                          | <b>Width</b>                                                                                                                                                                                                                                             | <b>Depth</b><br><b>0.32m</b> | <b>Diameter</b><br><b>0.38m</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>orangish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <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                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>frequency</b><br>bulk find <input type="checkbox"/>                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

### CROSS REFERENCE

|                        |           |                                                       |                                                                                                                                                                    |
|------------------------|-----------|-------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>/</b> | Finds nos | Photo nos<br><b>100-0687-690</b><br><b>100-0685-7</b> | Drawing nos <b>A14</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D.16202</b> |
|------------------------|-----------|-------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>11.1.18</b>                                                                                           |
| Initials <b>KT</b>                                                                                            |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

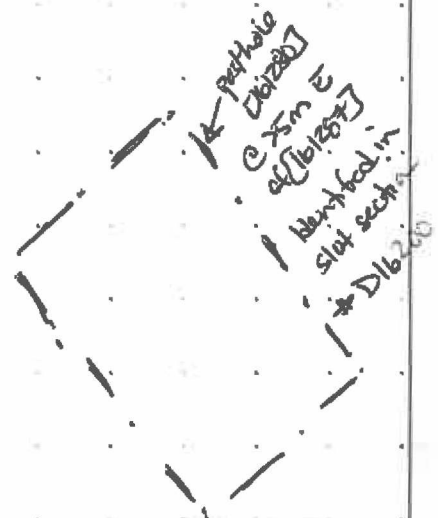
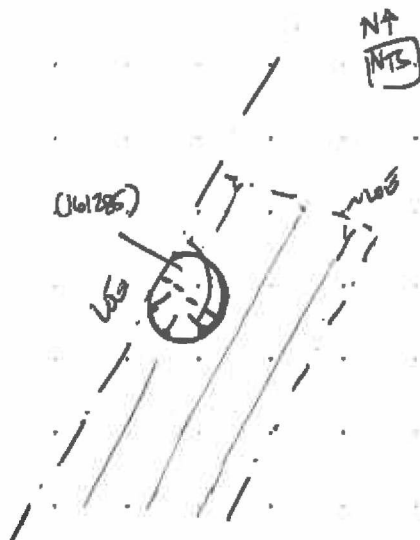
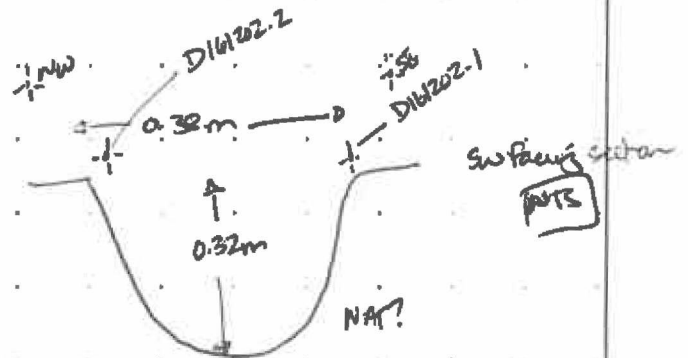
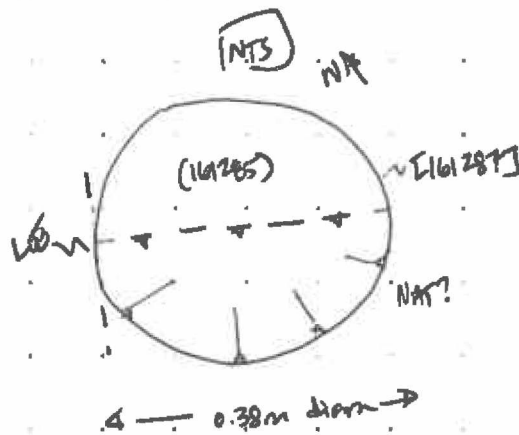
This is the cut of a posthole, backfilled w 2 fill. Its relationship to other postholes in the area is uncertain - one was identified in ditch slot [161275] (posthole # [161280]). The depth is right next to the bank, but in the ditch bank, the trees planted in the ditch and the ditch bank, which upon full excavation, the cut the

Refer to context

161285

## SKETCHES

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



A FRM16  
A14 TEA16  
ECB5052

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                  |                      |                          |                                                                                                                        |
|------------------|----------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA 16 | Sub-area/Trench<br>—     | Context number<br>161288                                                                                               |
| ECB #<br>—       | Subgroup<br>—        | Parent context<br>161288 | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                                                     |
|--|--|----------|--|--|-----------------------------------------------------|
|  |  | (161289) |  |  | Same as context <input checked="" type="checkbox"/> |
|  |  | (161288) |  |  | Cuts context ( )                                    |
|  |  | ( )      |  |  | 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"/> |                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                          |                        |                           | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>H <input type="checkbox"/> E-W<br>X <input type="checkbox"/> NE-SW<br>X <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                                 | <b>Sides</b><br>[ <input checked="" 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 checked="" type="checkbox"/> flat<br>U <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>~ <input type="checkbox"/> complex* |                        |                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>In metres                                                                                                                                                                                                                                                                          | <b>Length</b><br>—                                                                                                                                                                                                                                                                                               | <b>Width</b><br>—                                                                                                                                                                                                                                        | <b>Depth</b><br>0.36 m | <b>Diameter</b><br>0.70 m |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <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>orangish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><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                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| frequency:                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| bulk find                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

### CROSS REFERENCE

|                     |                    |                                      |                                                                                                                                                        |
|---------------------|--------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>16126 | Finds nos<br>16303 | Photo nos<br>1610605<br>↓<br>1610607 | Drawing nos<br>#19<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16204 |
|---------------------|--------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☒ use ☐ disuse ☐

|            |          |
|------------|----------|
| Date       | 15.01.18 |
| Initials   | AM       |
| Checked by |          |

# ADDITIONAL INFORMATION

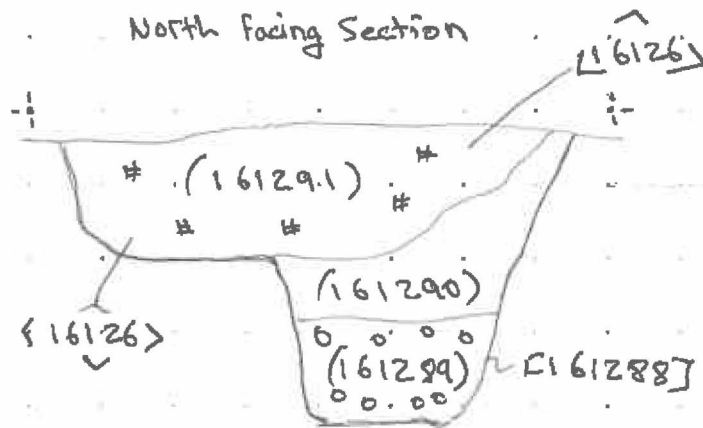
(any further details that may be important for understanding the context, including items marked \* overleaf)

Cut of pit which is within the relationship slot between the ring-ditch of the barrow and a N-S linear ditch. Evidence of flint wrapping can be found in the top fill of the pit. Giving it a likely, Bronze-Age date.

Refer to context 161289

## SKETCHES

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



### KEY

# - charcoal  
O - stone

MATRIX  
(161291)  
(161290)  
(161289)  
[161288]



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                                 |                                                                                                                        |
|-------------------------|-----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>-</b>     | Context number<br><b>(161289)</b>                                                                                      |
| ECB #<br><b>-</b>       | Subgroup<br><b>-</b>        | Parent context<br><b>161288</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                                                     |
|--|--|-----------------|--|--|-----------------------------------------------------|
|  |  | <b>(161290)</b> |  |  | Same as context <input checked="" type="checkbox"/> |
|  |  | <b>(161289)</b> |  |  | Cuts context <input checked="" type="checkbox"/>    |
|  |  | <b>(161288)</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 <input checked="" type="checkbox"/>                                                                                      | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input 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 checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown<br>greyish <input type="checkbox"/> <input type="checkbox"/> grey<br>orangeish <input checked="" type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> <input type="checkbox"/> red<br>blueish <input type="checkbox"/> <input type="checkbox"/> blue | <b>Composition</b><br>clayey <input type="checkbox"/> <input type="checkbox"/> clay<br>silty <input type="checkbox"/> <input type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input checked="" 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>0.15m</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                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 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<br><b>-</b> | Finds nos<br><b>-</b> | Photo nos<br><b>1610605</b><br><b>↓</b><br><b>1610607</b> | Drawing nos <b># 19</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D 16204</b> |
|------------------------|-----------------------|-----------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☐ disuse ☒

Date **15.01.18**  
Initials **AM**  
Checked by **-**

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

# ADDITIONAL INFORMATION

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

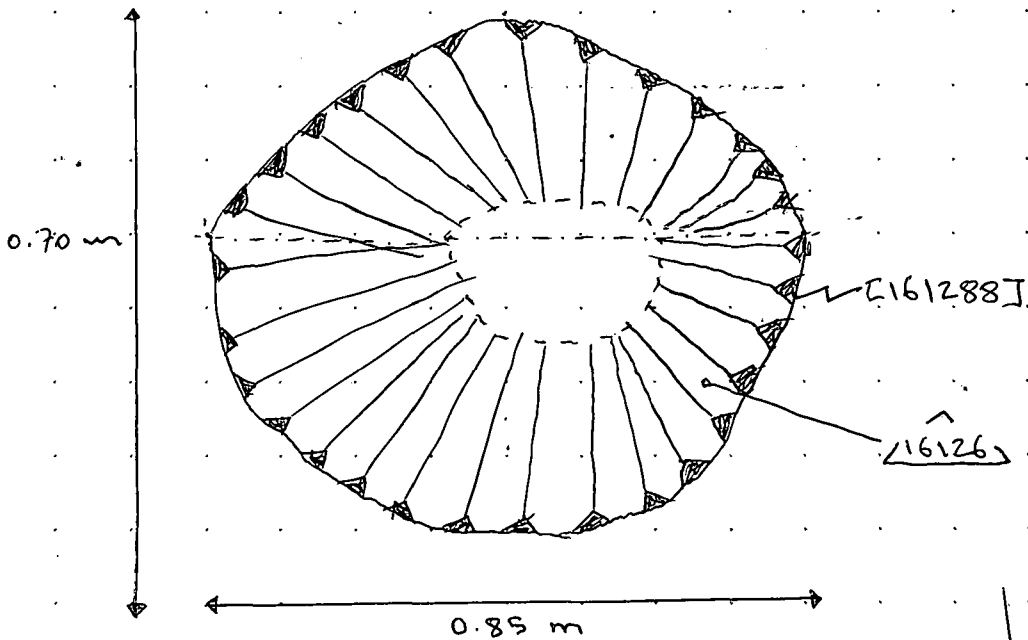
Natural infilling of the base of the pit, likely due to colluvial activity soon after the feature's construction. Also may be re-deposited natural as it is of a gravelly nature similar to the lower parts of the natural. No significant inclusions or finds.

Refer to context [161288]

## SKETCHES

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

### PLAN OF PIT







|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>---</b>     | Context number<br><b>(161290)</b>                                                                                      |
| ECB#<br><b>---</b>      | Subgroup<br><b>---</b>      | Parent context<br><b>[161289]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |                 |  |  |                            |
|--|--|-----------------|--|--|----------------------------|
|  |  | <b>(161291)</b> |  |  | Same as context <b>---</b> |
|  |  | <b>(161290)</b> |  |  | Cuts context <b>---</b>    |
|  |  | <b>[161289]</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"/> |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                              |              |  | <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 checked="" 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 checked="" type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                 | <b>Width</b>                                                                                                                                                                                                                                 | <b>Depth</b> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                              |              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                              |              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

**FILL/DEPOSIT**

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

**DESCRIPTION**

**INTERPRETATION**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------|------------------|---------|--------------|-----------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-----------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown<br>greyish <input type="checkbox"/> <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input checked="" type="checkbox"/> <input type="checkbox"/> red<br>blueish <input type="checkbox"/> <input type="checkbox"/> blue | <b>Composition</b><br>clayey <input type="checkbox"/> <input type="checkbox"/> clay<br>silty <input type="checkbox"/> <input checked="" type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat | <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><b>0.15m</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br><table border="1"> <tr> <td>use the following:<br/>O: occasional<br/>M: moderate<br/>F: frequent</td> <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><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> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 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"/> |
| 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**

|                          |                         |                                                           |                                                                                                                                                                      |
|--------------------------|-------------------------|-----------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>---</b> | Finds nos<br><b>---</b> | Photo nos<br><b>1610605</b><br><b>↓</b><br><b>1610607</b> | Drawing nos<br><b>f14</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16204</b> |
|--------------------------|-------------------------|-----------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Basic process**

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>15.01.18</b>                                                                                          |
| Initials <b>AM</b>                                                                                            |
| Checked by <b>---</b>                                                                                         |

# ADDITIONAL INFORMATION

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

Silting event which mostly fills up the pit  
No significant finds or inclusions.

Refer to context

161288  
161289

## SKETCHES

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

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                  |                      |                            |                                                                                                                        |
|------------------|----------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA 16 | Sub-area/Trench<br>-       | Context number<br>(161291)                                                                                             |
| ECB #<br>-       | Subgroup<br>-        | Parent context<br>(161288) | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                                                     |
|--|--|----------|--|--|-----------------------------------------------------|
|  |  | ( )      |  |  | Same as context <input checked="" type="checkbox"/> |
|  |  | (161291) |  |  | Cuts context <input type="checkbox"/>               |
|  |  | (161290) |  |  | Cut by context <input checked="" type="checkbox"/>  |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br><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"/> brown <input checked="" type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input 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>0.17 m                                                                                                                                                            | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency<br>bulk find                                                                                                                                                                | stones*<br>chalk<br>iron pan<br>manganese<br>charcoal<br>plant remains*<br>wood<br>marine shell<br>bone*<br>pot<br>fired clay / CBM<br>CTP<br>mortar/plaster<br>leather/textile<br>glass<br>metal<br>industrial waste<br>lithics<br>coarse stone                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

|                     |                    |                                      |                                                                                                                                                        |
|---------------------|--------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>16126 | Finds nos<br>16303 | Photo nos<br>1610605<br>↓<br>1610607 | Drawing nos<br>A14<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16204 |
|---------------------|--------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date: 15.01.18                                                                                                |
| Initials: AM                                                                                                  |
| Checked by:                                                                                                   |

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

# ADDITIONAL INFORMATION

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

Probable dumped layer which puts the pit out of use. A fair amount of charcoal present, which was then sampled. Good amount of evidence for unapping activity. A flint core F16303 and some debitage and flakes. Likely to be Bronze-Age in date. Seemingly capped by one of the later fills of the ring ditch.

Refer to context

161288  
161289

## SKETCHES

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

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                  |                     |                            |                                                                                                                        |
|------------------|---------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA16 | Sub-area/Trench            | Context number<br><del>E161291</del> (161292)                                                                          |
| ECB #            | Subgroup            | Parent context<br>(161291) | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161293) |  |  | Same as context |
|  |  | (161291) |  |  | Cuts context    |
|  |  |          |  |  | Cut by context  |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input 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"/><br><b>CREMATION PIT</b> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                                 | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |                      |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>Dimensions</b><br>In metres                                                                                                                                                                                                                                                                          | <b>Length</b><br>0.94                                                                                                                                                                                                                                                                       | <b>Width</b><br>0.94                                                                                                                                                                                                                          | <b>Depth</b><br>0.58 | <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>orangish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>bluish <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                                                                                     | 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 | Drawing nos S MEET 18<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16205 |
|-----------------|----------------|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date 15 / 01 / 18                                                                                             |
| Initials DD                                                                                                   |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

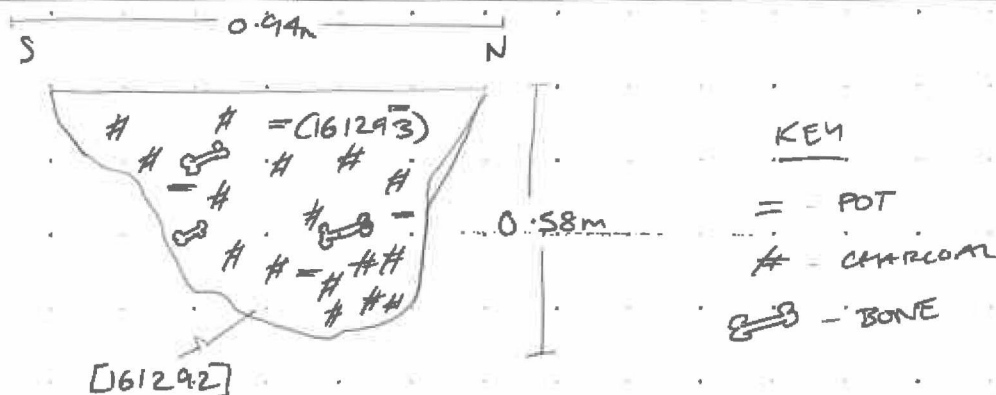
CUT OF CREMATION PIT THAT IS POTENTIALLY CUT INTO AN INNER DITCH RELATED ~~AREA~~ TO A BRONZE AGE BURIAL MOUND / BARROW. THIS IS ONE OF MANY CREMATION FOUND WITHIN THE MOUND. THIS ~~IS~~ IS A BIT DIFFERENT TO THE OTHER CREMATIONS AS IT IS MUCH LARGER, DEEPER AND ~~THE~~ STILL HAD A LOT OF COMPLETE BONE PIECES.

AROUND THE EDGE OF THIS PIT THE MATERIAL WAS BURNT IN SITU ~~AND~~ OR HEATED BY ~~THE~~ THE CREMATED BONES. DATE IS UNKNOWN AS THERE WAS ONLY VERY FRAGMENTED AND DISINTEGRATED POT.

Refer to context

## SKETCHES

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





## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  |          |  |  | Same as context |
|  |  | (161293) |  |  | Cuts context    |
|  |  | [161292] |  |  | 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                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | opt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 10.5  |          |
| 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 SHEET 18                                                                                                             | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|-------------------------|-----------|-----------|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| 16127<br>16128<br>16129 | /         |           | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16205 | Date 15/01/11<br>Initials DD/R<br>Checked by                                                                             |

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



# ADDITIONAL INFORMATION

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

THIS IS THE FILL OF A PIT THAT IS A CREMATION. THE FILL IS A MIX OF CHARCOAL, CREMATED BONE, BONE FRAGMENTS AND ~~DISINTEGRATED~~ DEGRADED POT. THE BONE IS HUMAN AND MOST LIKELY ADULT. ~~THE~~ THE PIT IS ONE OF MANY CREMATIONS FOUND WITHIN A PREHISTORIC BURIAL MOUND. THERE ~~WAS~~ WAS A LOT OF BONE THAT HAD NOT BEEN CREMATED FULLY SO POTENTIALLY COULD BE MORE THAN ONE INDIVIDUAL. ~~ON~~ ON THE EDGE OF THE PIT THE MATERIAL IS RED SO THE CREMATED REMAINS WOULD HAVE BEEN PUT IN THE PIT HOT, CAUSING IN-SITU BURNING OF THE EDGES. NO OTHER FINDS

Refer to context

[161 292]

## SKETCHES

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

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161110) |  |  | Same as context |
|  |  | (161294) |  |  | Cuts context    |
|  |  | [161111] |  |  | Cut by context  |

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

## 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                                                                                                                                             |               | <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* |
|                                                                                                                                                                                            |               |                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                    |
| <b>Dimensions</b>                                                                                                                                                                                                                                                            | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b>                                                                                                                                                                                                    |
| in metres                                                                                                                                                                                                                                                                    |               |                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                    |
| <b>Shape result of: (tick all that apply)</b>                                                                                                                                                                                                                                |               |                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                    |
| 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                       | <input type="checkbox"/> moderately compact | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input checked="" type="checkbox"/> |                          | clayey <input checked="" type="checkbox"/> <input type="checkbox"/> clay |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> friable            | brownish <input type="checkbox"/> brown <input type="checkbox"/>                                                                      |                          | silty <input type="checkbox"/> silt <input type="checkbox"/>             |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/>                                                             |                          | sandy <input type="checkbox"/> sand <input type="checkbox"/>             |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | orangeish <input type="checkbox"/> orange <input type="checkbox"/>                                                                    |                          | gravelly <input type="checkbox"/> gravel <input type="checkbox"/>        |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | yellowish <input type="checkbox"/> yellow <input checked="" type="checkbox"/>                                                         |                          | peaty <input type="checkbox"/> peat <input type="checkbox"/>             |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | reddish <input type="checkbox"/> red <input type="checkbox"/>                                                                         |                          |                                                                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | blueish <input type="checkbox"/> blue <input type="checkbox"/>                                                                        |                          |                                                                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                             |                                                                                                                                       |                          |                                                                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 6.34m PFD                                                         |                                             | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                         |                          | other* <input checked="" type="checkbox"/> ? unknown black               |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Inclusions                                                        |                                             |                                                                                                                                       |                          |                                                                          |                                     |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                     | chalk                                                                                                                                 | iron pan                 | manganese                                                                | charcoal                            | plant remains*                      | wood                                | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |                          |
| frequency                                                         |                                             |                                                                                                                                       |                          |                                                                          | ?                                   | ?                                   | ?                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                         | <input type="checkbox"/>                    | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/>                                                 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <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) ☒

unknown origin  
 intentional or natural

### CROSS REFERENCE

| Sample nos | Finds nos | Photo nos | Drawing nos                                                                                                 | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|------------|-----------|-----------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| 100        |           |           | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | Date 31.1.18<br>Initials KF & DJ<br>Checked by                                                                |

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

# ADDITIONAL INFORMATION

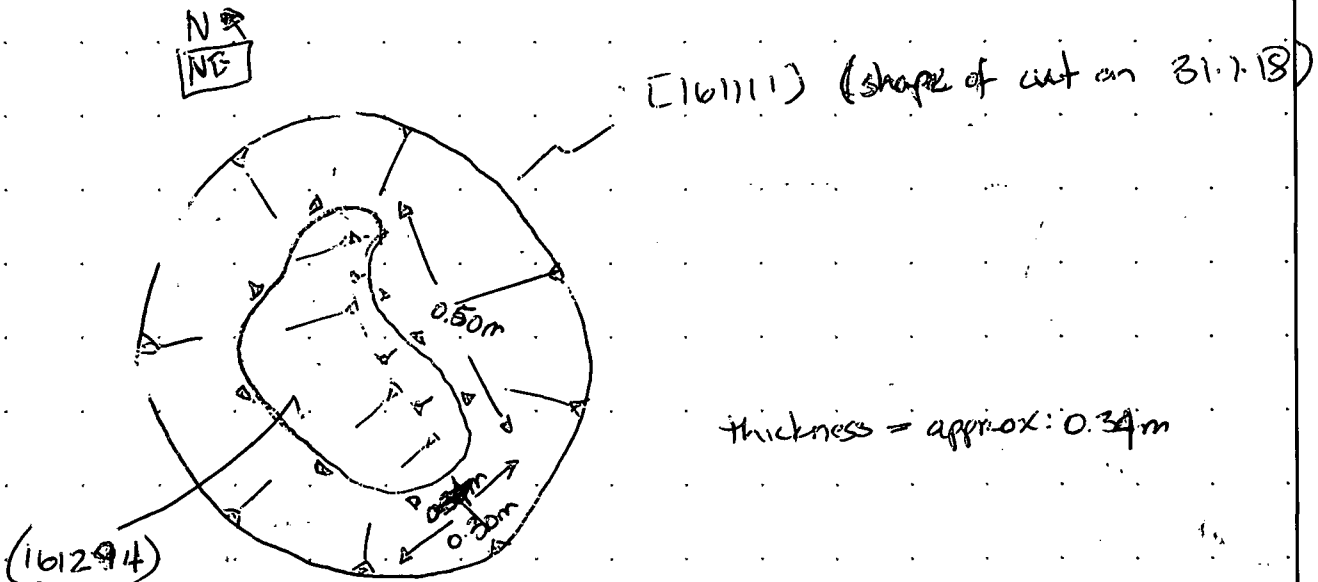
(any further details that may be important for understanding the context, including items marked \* overleaf)

This is a ~~large~~ relatively concentrated + large deposit found toward the center of the pit - it wasn't originally visible when the section for (161110) was sketched. It ~~looks~~ seems to be organic material (wood, leather?) & has been collected (wrapped in cellophane & gauze) with some remnants collected in a bucket.

Refer to context (161104), (161110)

## SKETCHES

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





|                         |                            |                                       |                                                                                                                        |
|-------------------------|----------------------------|---------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>SE QUADRANT</b> | Context number<br><b>(161295)</b>                                                                                      |
| ECB#                    | Subgroup                   | Parent context<br><b>161296</b>       | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  |               |  |  | Same as context |
|  |  | <b>161295</b> |  |  | Cuts context    |
|  |  | <b>161296</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>1 <input type="checkbox"/> vertical<br>1 <input type="checkbox"/> steep<br>1 <input type="checkbox"/> moderate<br>1 <input type="checkbox"/> gentle<br>1 <input type="checkbox"/> stepped<br>1 <input type="checkbox"/> undercutting<br>1 <input type="checkbox"/> complex* | <b>Base</b><br>1 <input type="checkbox"/> flat<br>1 <input type="checkbox"/> concave<br>1 <input type="checkbox"/> v-shaped<br>1 <input type="checkbox"/> sloping<br>1 <input type="checkbox"/> uneven<br>1 <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

**FILL/DEPOSIT**

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

**DESCRIPTION**

**INTERPRETATION**

|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat                                                                                                                                                                                                                                                                                                                                                                                                            | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input 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 checked="" type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><b>0.14</b>                                                                                                                                                       | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency <b>M</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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency <b>M</b>                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

**CROSS REFERENCE**

|                                    |                  |                                                                        |                                                                                                                                                                         |                                                                                                                            |
|------------------------------------|------------------|------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <b>Sample nos</b><br><b>S16227</b> | <b>Finds nos</b> | <b>Photo nos</b><br><b>1610907</b><br><b>1610908</b><br><b>1610913</b> | <b>Drawing nos</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16260</b> <b>27</b> | <b>Basic process</b><br>construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| <b>Date</b> <b>7/2/18</b>          |                  |                                                                        |                                                                                                                                                                         | <b>Initials</b> <b>LE</b>                                                                                                  |
| <b>Checked by</b>                  |                  |                                                                        |                                                                                                                                                                         |                                                                                                                            |

# ADDITIONAL INFORMATION

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

FILL OF CREMATION [161296] WITH POTTERY  
FRAGMENT AND LITHIC FRAGMENT, ADJACENT  
TO RING DITCH

Refer to context | 161295

## SKETCHES

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

SEE [161296]

# MOLA HEADLAND INFRASTRUCTURE



AFRM16  
A14 TEA16  
ECB5052

## CONTEXT SHEET

|                         |                            |                                       |                                                                                                                        |
|-------------------------|----------------------------|---------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>SE QUADRANT</b> | Context number<br><b>161296</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>161295</b> |               |  |  | Same as context |
|  | <b>161296</b> | <b>161295</b> |  |  | Cuts context    |
|  | <b>161002</b> | <b>161296</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 checked="" 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>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>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><b>0.15</b>                                                                                                                                                                                                                                                                           | <b>Width</b><br><b>0.15</b> | <b>Depth</b><br><b>0.14</b>                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Diameter</b><br><b>0.15</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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <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>                                                                                                                                                           |  | bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

### CROSS REFERENCE

|                         |           |                                                                 |                                                                                                                                                                  |
|-------------------------|-----------|-----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>3A</b> | Finds nos | Photo nos<br><b>1610907</b><br><b>1610908</b><br><b>1610913</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>016260</b> <b>27</b> |
|-------------------------|-----------|-----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>7/2/18</b>                                                                                            |
| Initials <b>LE</b>                                                                                            |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

CUT OF CREMATION CUTS INTO SUBSOIL  
ADJACENT TO DITCH

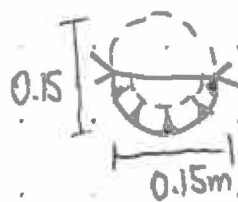
Refer to context

161296

## SKETCHES

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

W E  
[161296] (161295) 0.14m  
SOUTH FACING SECTION



N  
↑  
N.T.S.

DITCH SLOT



## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161523) |  |  | Same as context |
|  |  | (161297) |  |  | Cuts context    |
|  |  | (161298) |  |  | Cut by context  |

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

## 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 |
|-----------|-------|-------|----------|
| in metres |       |       |          |

**Shape result of:** (tick all that apply)

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

other cut (describe below)

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

# INTERPRETATION

[illegible]

### Basic process

|                                |                   |                                    |                                                                                                                                                      |                                                                                                                                                               |
|--------------------------------|-------------------|------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>S16235<br>S16236 | Findings nos<br>/ | Photo nos<br>1610922 To<br>1610925 | Drawing nos 16264<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>S# 28 | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/><br>Date: 19.2.18<br>Initials: CV<br>Checked by: |
|--------------------------------|-------------------|------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|

# ADDITIONAL INFORMATION

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

## FILL OF CREMATION.

IT WAS MODERATELY COMPACT, MID BROWN-GREYISH COLOR AND WITH A CLAY-SILTY TEXTURE.

IT WAS PART OF A BLACK CREMATION.

~~IT~~ IT WAS FOUND ~~IN THE~~ BONES ~~AND~~ THERE WAS A MODERATELY PRESENCE OF CHARCOAL.

FIND SOME SMALL PIECE OF POT.

Refer to context

(161298)

(161528)

SKETCHES

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

## STRATIGRAPHY

|  |  |          |  |  |                 |  |
|--|--|----------|--|--|-----------------|--|
|  |  | (161297) |  |  | Same as context |  |
|  |  | (161298) |  |  | Cuts context    |  |
|  |  | (161299) |  |  | 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<br><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>                                                                                                                                                                                                                                                                            | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of:</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                      |                                                                                                                                                                                                                                                                                          |              |                                                                                                                                                                                                                                   |                 |

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

### DESCRIPTION

## INTERPRETATION

| Compaction                                                        |                                                        | Colour                                                                                                                     |                                                                                             | Composition                               |                                          |                          |                                     |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
|-------------------------------------------------------------------|--------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|-------------------------------------------|------------------------------------------|--------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input checked="" type="checkbox"/> moderately compact | light <input type="checkbox"/> mid <input 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"/> brown <input type="checkbox"/>                                                           | <input type="checkbox"/> greyish <input type="checkbox"/> grey <input type="checkbox"/>     | silty <input checked="" type="checkbox"/> | <input type="checkbox"/> silt            |                          |                                     |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
|                                                                   |                                                        | orangeish <input type="checkbox"/> orange <input type="checkbox"/>                                                         | <input type="checkbox"/> yellowish <input type="checkbox"/> yellow <input type="checkbox"/> | sandy <input type="checkbox"/>            | <input type="checkbox"/> sand            |                          |                                     |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
|                                                                   |                                                        | reddish <input type="checkbox"/> red <input type="checkbox"/>                                                              | <input type="checkbox"/> blueish <input type="checkbox"/> blue <input type="checkbox"/>     | gravelly <input type="checkbox"/>         | <input type="checkbox"/> gravel          |                          |                                     |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
|                                                                   |                                                        |                                                                                                                            |                                                                                             | peaty <input type="checkbox"/>            | <input type="checkbox"/> peat            |                          |                                     |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| Thickness                                                         |                                                        |                                                                                                                            |                                                                                             | other* <input type="checkbox"/>           |                                          |                          |                                     |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| 0.14                                                              |                                                        | black <input checked="" 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                                                      |                                                                                                                            |                                                                                             |                                           | F                                        |                          | M                                   |                          | F                                   |                          |                          |                          |                          |                          |                          |                          |                          | O                                   |                          |                          |
| bulk find                                                         | <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 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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

### CROSS REFERENCE

| Sample nos       | Finds nos | Photo nos                | Drawing nos                                                                                                                             |
|------------------|-----------|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| S16229<br>S16234 | /         | 1610922<br>to<br>1610925 | 16264<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>S#28 |

### Basic process

construction ☐ use ☒ disuse ☐

Date 19.2.18

Initials CV

Checked by

# ADDITIONAL INFORMATION

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

## FILL OF CREMATION

IT WAS MODERATELY COMPACT, BLACK COLOR AND CLAY SILTY TEXTURE.

THE BONES FOUND INSIDE WERE STILL MODERATELY INTACT COMPARED TO OTHER CREMATIONS DUG IN THE SAME AREA.

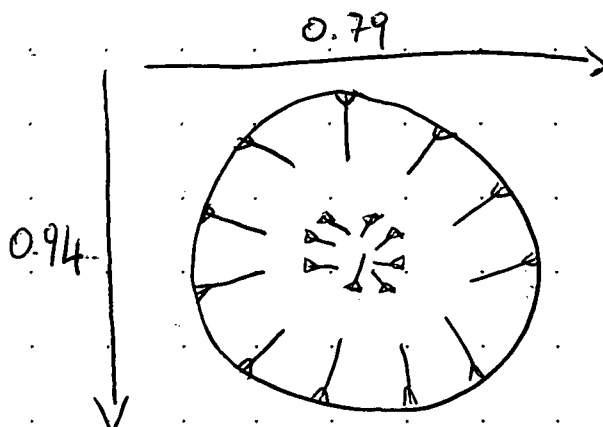
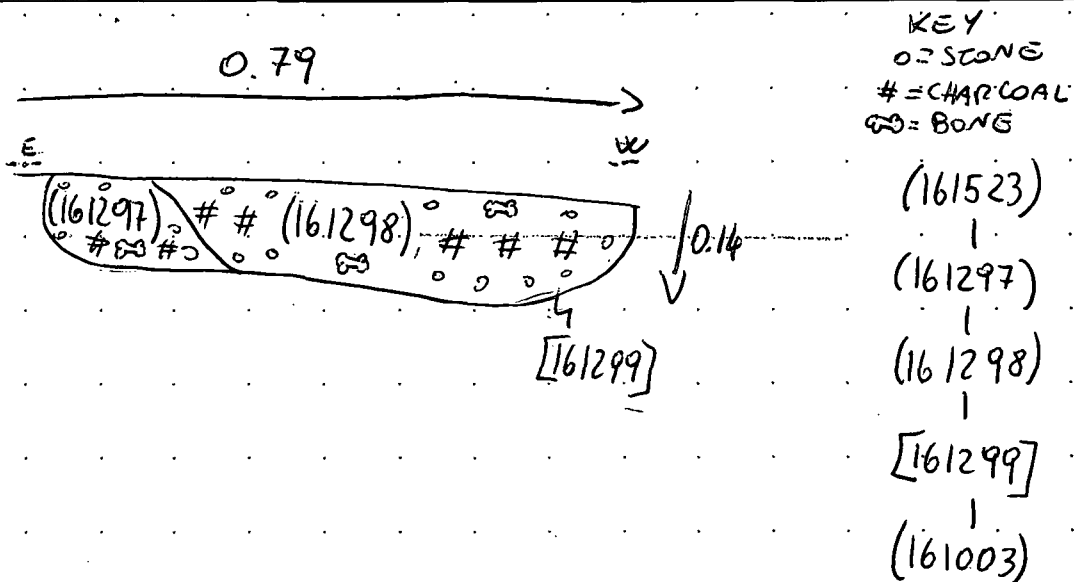
IT WAS FULL OF CHARCOAL AND WOODEN PIECES WERE ALSO FOUND THAT HAVE BEEN USED, MOST LIKELY, TO BURN THE BODY.

FIND ALSO TWO PIECES OF LITHICS.

Refer to context [161528]

## SKETCHES

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



# MOLA HEADLAND INFRASTRUCTURE



AFRM16  
A14 TEA16  
ECB5052

## CONTEXT SHEET

|                          |                             |                                   |                                                                                                                        |
|--------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench                   | Context number<br><b>[161299]</b>                                                                                      |
| ECB #                    | Subgroup                    | Parent context<br><b>[161299]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                            |
|--|--|-----------------|--|--|----------------------------|
|  |  | <b>(161298)</b> |  |  | Same as context            |
|  |  | <b>[161299]</b> |  |  | Cuts context <b>161003</b> |
|  |  | <b>(161003)</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 checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                                                              |                             |                                                                                                                                                                                                                                                        | pit <input 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 checked="" 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>X <input type="checkbox"/> NE-SW<br>Y <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                                            |               | <b>Sides</b><br>L <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>Z <input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |                             | <b>Base</b><br>— <input type="checkbox"/> flat<br>U <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> | <b>Width</b>                                                                                                                                                                                                                                                                                                 | <b>Depth</b><br><b>0.14</b> | <b>Diameter</b><br><b>0.79</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<br>greyish <input type="checkbox"/> grey<br>orangish <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> red<br>blueish <input type="checkbox"/> blue<br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> |  | <b>Composition</b><br>clayey <input type="checkbox"/> 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<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>                                                                                                                                                                                                                                 |                        | 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>square stone | frequency<br>bulk find |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

### CROSS REFERENCE

|                        |                       |                                                     |                                                                                                                                                                  |
|------------------------|-----------------------|-----------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>/</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610922</b><br>To<br><b>1610925</b> | Drawing nos <b>16264</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>#28</b> |
|------------------------|-----------------------|-----------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☒ use ☐ disuse ☐

Date **19.2.18**

Initials **CV**

Checked by

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

IT HAS A SUB-CIRCULAR SHAPE, WITH MODERATE SIDE AND CONCAVE BASE.

~~CONFIDENTIAL - SECURITY INFORMATION~~

THE AREA IS STILL UNDER ARCHAEOLOGICAL INVESTIGATION.

(161298)

□61528

(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 16</b> | Sub-area/Trench                   | Context number<br><b>[161301]</b>                                                                                      |
| ECB#                     | Subgroup                    | Parent context<br><b>[161301]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                              |
|--|--|-----------------|--|--|------------------------------|
|  |  | <b>(161302)</b> |  |  | Same as context              |
|  |  | <b>[161301]</b> |  |  | Cuts context <b>(161409)</b> |
|  |  | <b>(161409)</b> |  |  | Cut by context               |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |                      |                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |                      |                         | <input 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 checked="" type="checkbox"/> NE-SW<br><input checked="" type="checkbox"/> NW-SE<br><br><input checked="" type="checkbox"/> N                                                                               | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<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><br>0.08 | <b>Diameter</b><br>0.30 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <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"/> | <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>                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <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>                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>bulk find</b>                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS-REFERENCE

|            |           |                               |                                                                                                                                                 |
|------------|-----------|-------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                     | Drawing nos                                                                                                                                     |
|            |           | 1610608<br>1610609<br>1610610 | 16206<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><br>SHEET 18 |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date 25.1.18                                                                                                  |
| Initials FG                                                                                                   |
| Checked by                                                                                                    |



# ADDITIONAL INFORMATION

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

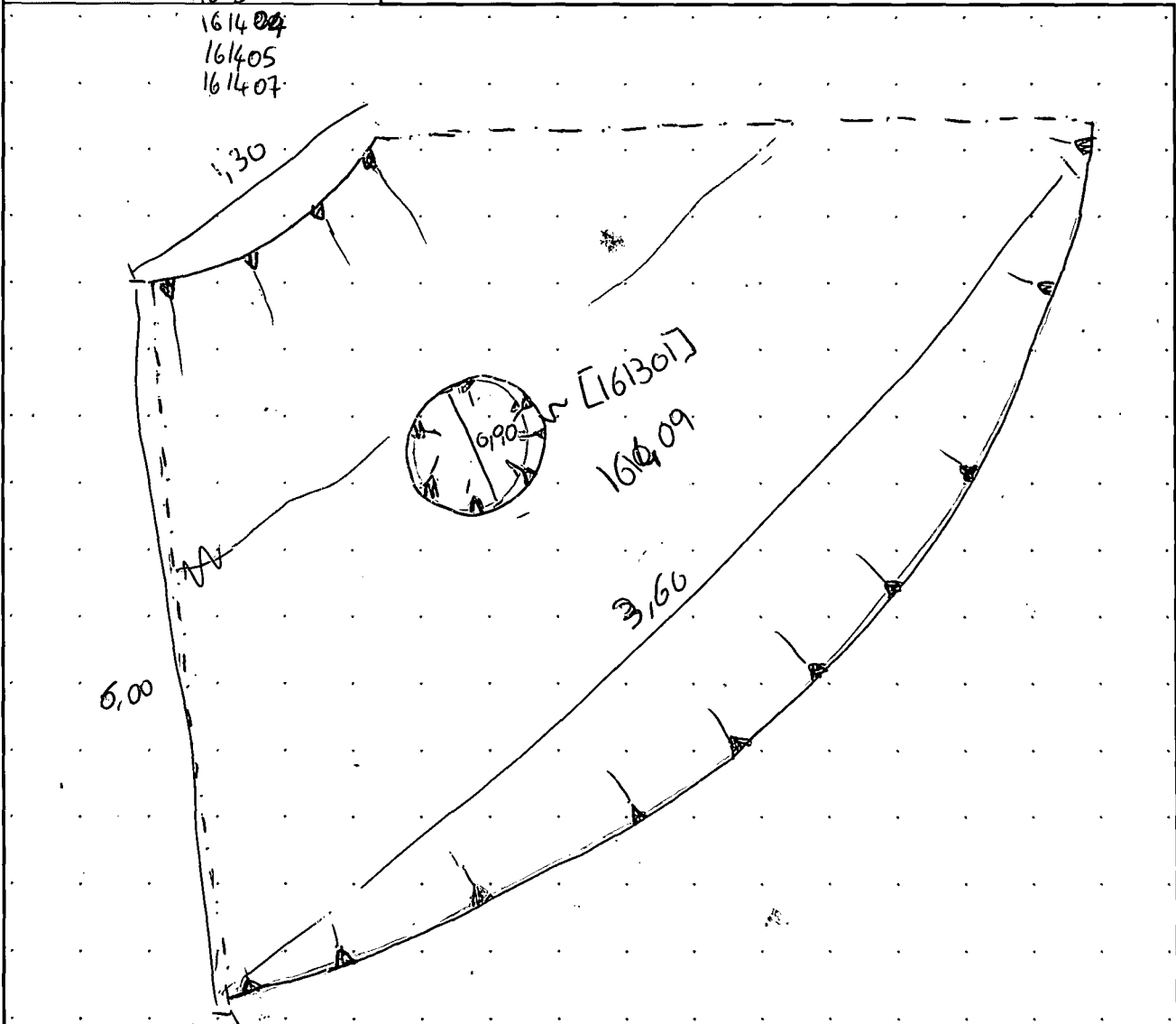
OUT OF A FINE PIT. IT IS POSSIBLE TO SEE ONLY THE  
 BOTTOM OF THIS CUT. IT IS UNCLEAR IF THIS PIT HAS  
 A RELATION WITH [161286], A CREATION OR AN IN SITU BURNING  
 WITH A POT IN IT.

Refer to context

[161302] PLAN  
 161302 SECTION

## SKETCHES

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



## STRATIGRAPHY

|  |  |          |  |  |                         |
|--|--|----------|--|--|-------------------------|
|  |  | (161404) |  |  | Same as context         |
|  |  | (161302) |  |  | Cuts context            |
|  |  | (161301) |  |  | Cut by context (161404) |

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

## INTERPRETATION

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

pit ☐

post-hole ☐

stake-hole ☐

ditch ☐

ring-ditch ☐

beam slot ☐

construction cut ☐

robber cut ☐

gully ☐

palaeochannel ☐

furrow ☐

field boundary ☐

burial cut ☐

other cut (describe below) ☐

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

## INTERPRETATION

[illegible]

### Basic process

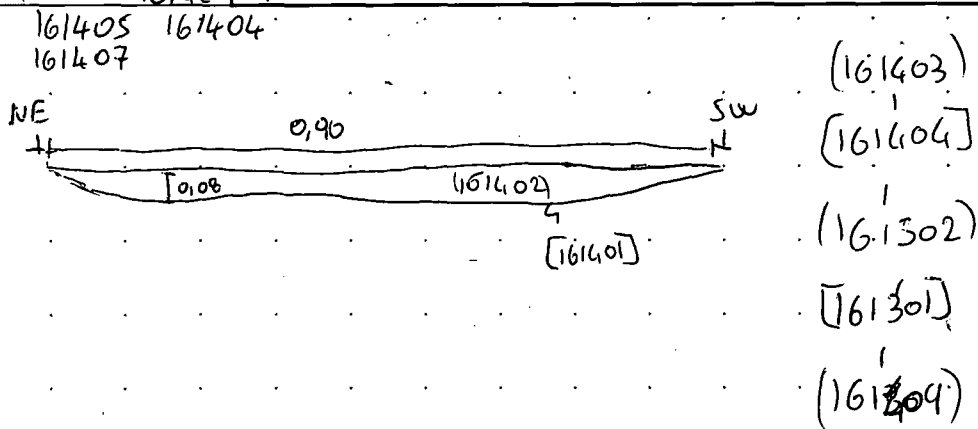
|                     |                |                                            |                                                                                                                                                           |                                                                                                                                                               |
|---------------------|----------------|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>16203 | Finds nos<br>/ | Photo nos<br>1610608<br>1610609<br>1610610 | Drawing nos: D16206<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>SHEET 18 | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/><br>Date: 25.1.18<br>Initials: FG<br>Checked by: |
|---------------------|----------------|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|

# ADDITIONAL INFORMATION

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

FILL OF A PROBABLE FIRE PIT CUT BY THE RECT  
[161404] OF THE RING DITCH [161420]. THE IN ~~12288~~  
HERE ARE SIGNS OF HEAT EXPOSURE, AND THERE IS A  
DARK CHARCOALY SPOT IN THE MIDDLE OF THE PIT. THE EXTERNAL  
PART IS MORE RED THAN THE INNER ONE BUT THERE AREN'T  
CLEAR MARGINS. THERE ARE SOME SMALL PIECES OF CB AND  
CARBONIZED BONES

Refer to context ~~161401~~ 161401 PLAN 161420 GEN PLAN (consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate) SKETCHES





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

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | BWS Trench |                 | (161303)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [161440]        | cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161486) |  |  | Same as context |
|  |  | (161303) |  |  | Cuts context    |
|  |  | (161487) |  |  | 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><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>                                                                                                                                                                                                                                                                            | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Depth</b> | <b>Diameter</b> |
| 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

| Compaction                                                        |                                             | Colour                                                                                                                                |                                                         | Composition                                                              |                  |
|-------------------------------------------------------------------|---------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|--------------------------------------------------------------------------|------------------|
| <input type="checkbox"/> compact                                  | <input type="checkbox"/> moderately compact | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/> |                                                         | clayey <input checked="" type="checkbox"/> <input type="checkbox"/> clay |                  |
| <input type="checkbox"/> loose                                    | <input checked="" type="checkbox"/> friable | brownish <input type="checkbox"/> <input type="checkbox"/> brown                                                                      |                                                         | silty <input type="checkbox"/> <input type="checkbox"/> silt             |                  |
|                                                                   |                                             | greyish <input checked="" type="checkbox"/> <input type="checkbox"/> grey                                                             |                                                         | sandy <input type="checkbox"/> <input type="checkbox"/> sand             |                  |
|                                                                   |                                             | orangeish <input type="checkbox"/> <input type="checkbox"/> orange                                                                    |                                                         | gravelly <input type="checkbox"/> <input type="checkbox"/> gravel        |                  |
|                                                                   |                                             | yellowish <input type="checkbox"/> <input type="checkbox"/> yellow                                                                    |                                                         | peaty <input type="checkbox"/> <input type="checkbox"/> peat             |                  |
|                                                                   |                                             | reddish <input type="checkbox"/> <input type="checkbox"/> red                                                                         |                                                         |                                                                          |                  |
|                                                                   |                                             | blueish <input type="checkbox"/> <input type="checkbox"/> blue                                                                        |                                                         |                                                                          |                  |
| Thickness                                                         |                                             |                                                                                                                                       |                                                         |                                                                          |                  |
| 0.01m                                                             |                                             | black <input checked="" type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                              | other* <input checked="" type="checkbox"/> charcoal dep |                                                                          |                  |
| Inclusions                                                        |                                             |                                                                                                                                       |                                                         |                                                                          |                  |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                     | chalk                                                                                                                                 | iron pan                                                | manganese                                                                | charcoal         |
|                                                                   |                                             |                                                                                                                                       |                                                         |                                                                          | plant remains*   |
|                                                                   |                                             |                                                                                                                                       |                                                         |                                                                          | wood             |
|                                                                   |                                             |                                                                                                                                       |                                                         |                                                                          | marine shell     |
|                                                                   |                                             |                                                                                                                                       |                                                         |                                                                          | bone*            |
|                                                                   |                                             |                                                                                                                                       |                                                         |                                                                          | pot              |
|                                                                   |                                             |                                                                                                                                       |                                                         |                                                                          | fired clay / CBM |
|                                                                   |                                             |                                                                                                                                       |                                                         |                                                                          | CTP              |
|                                                                   |                                             |                                                                                                                                       |                                                         |                                                                          | mortar/plaster   |
|                                                                   |                                             |                                                                                                                                       |                                                         |                                                                          | leather/textile  |
|                                                                   |                                             |                                                                                                                                       |                                                         |                                                                          | glass            |
|                                                                   |                                             |                                                                                                                                       |                                                         |                                                                          | metal            |
|                                                                   |                                             |                                                                                                                                       |                                                         |                                                                          | industrial waste |
|                                                                   |                                             |                                                                                                                                       |                                                         |                                                                          | lithics          |
|                                                                   |                                             |                                                                                                                                       |                                                         |                                                                          | coarse stone     |
| frequency                                                         |                                             |                                                                                                                                       |                                                         |                                                                          |                  |
|                                                                   |                                             |                                                                                                                                       |                                                         |                                                                          |                  |
| bulk find                                                         |                                             |                                                                                                                                       |                                                         |                                                                          |                  |

### CROSS REFERENCE

| Sample nos    | Finds nos | Photo nos | Drawing nos                                                                                                 |
|---------------|-----------|-----------|-------------------------------------------------------------------------------------------------------------|
| S16202<br>20L |           |           | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |

### Basic process

construction ☐ use ☐ disuse ☒

Date 19.1.17

Initials W

Checked by

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

# ADDITIONAL INFORMATION

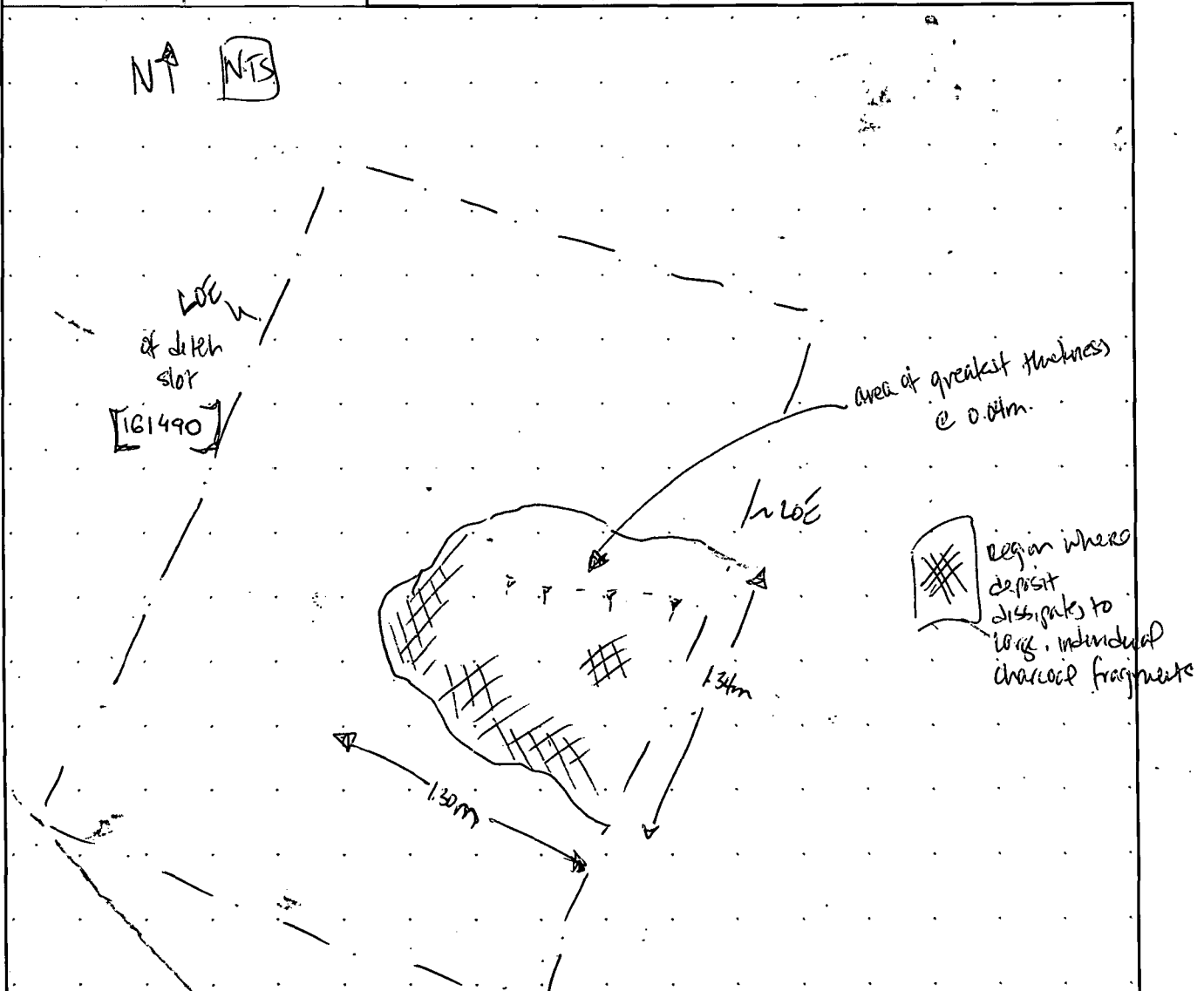
(any further details that may be important for understanding the context, including items marked \* overleaf)

This is a charcoal deposit found toward the middle & east edge of ditch slot [61490], parent context [61303]. Lithics + pottery were collected prior to bulk sampling. The deposit is quite thin & seems to disperse toward the west & south, where charcoal fragments are found more dispersed (as opposed to the concentrated region in the center & east edge of the ditch slot).

Refer to context [61490]

## SKETCHES

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



## STRATIGRAPHY

|  |  |           |  |  |                 |  |
|--|--|-----------|--|--|-----------------|--|
|  |  | (1610021) |  |  | Same as context |  |
|  |  | (161304)  |  |  | Cuts context    |  |
|  |  | [161305]  |  |  | 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 checked="" 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"/>                                       |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                 |

(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"/> |
|------------|-----------|------------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
|            |           | 1610612/13 | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | Date: 22/01/19<br>Initials: SMZ<br>Checked by:                                                                |

# ADDITIONAL INFORMATION

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

FILL OF RING BARROW DITCH/ENCLOSURE. CONSISTS OF A HOMOGENEOUS MIXED MATERIAL, MAINLY A SILTY CLAY WITH FREQUENT GRAVEL POCKETS THROUGHOUT

OBSERVED VIA AN EVAL SLOT. APPROX. 3m IN WIDTH.

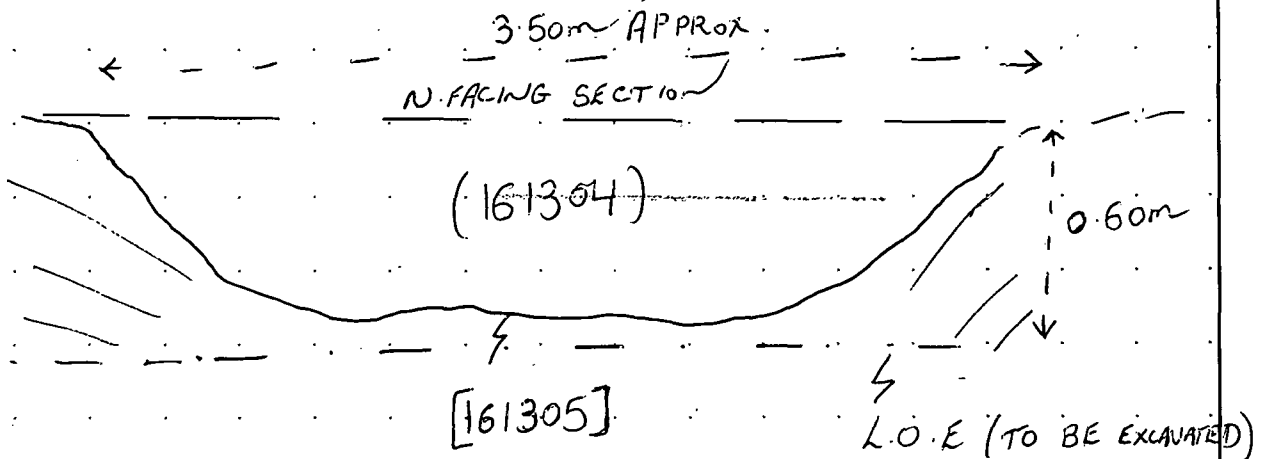
INTERPRETED AS THE DELIBERATE BACKFILL FOR A RECT OF DITCH.

SEVERAL PIECES OF LIKEN WORKED FLINT WERE OBSERVED. POSSIBLE STONE HAND TOOL ALSO NOTED.

Refer to context (161304)

## SKETCHES

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





# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |            |                 |                                                                                                                        |
|-------------------------|------------|-----------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 TEA 16 | Area/Field | Sub-area/Trench | Context number<br>[161305]                                                                                             |
| ECB#                    | Subgroup   | Parent context  | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | 161304   |  |  | Same as context |
|  |  | [161305] |  |  | Cuts context    |
|  |  |          |  |  | 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 checked="" 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<br><input checked="" 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                                                                                                                                                                                                                                                                               | > 3.50 m                                                                                                                                                                                                                                                                 | 3.50 m                                                                                                                                                                                                                        | 0.60 m | /        |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |        |          |
| design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                       |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |        |          |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input 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

|                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 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*<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 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                                                                                                                                 |
|            |           | 1610612/13<br>1610614/18 | 16209<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>SHEET 21 |

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| Basic process                                                                                                 |
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date                                                                                                          |
| 22/01/18                                                                                                      |
| Initials                                                                                                      |
| SR                                                                                                            |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

RECAST ON THE RING-BARRIED DITCH/ENCLOSURE

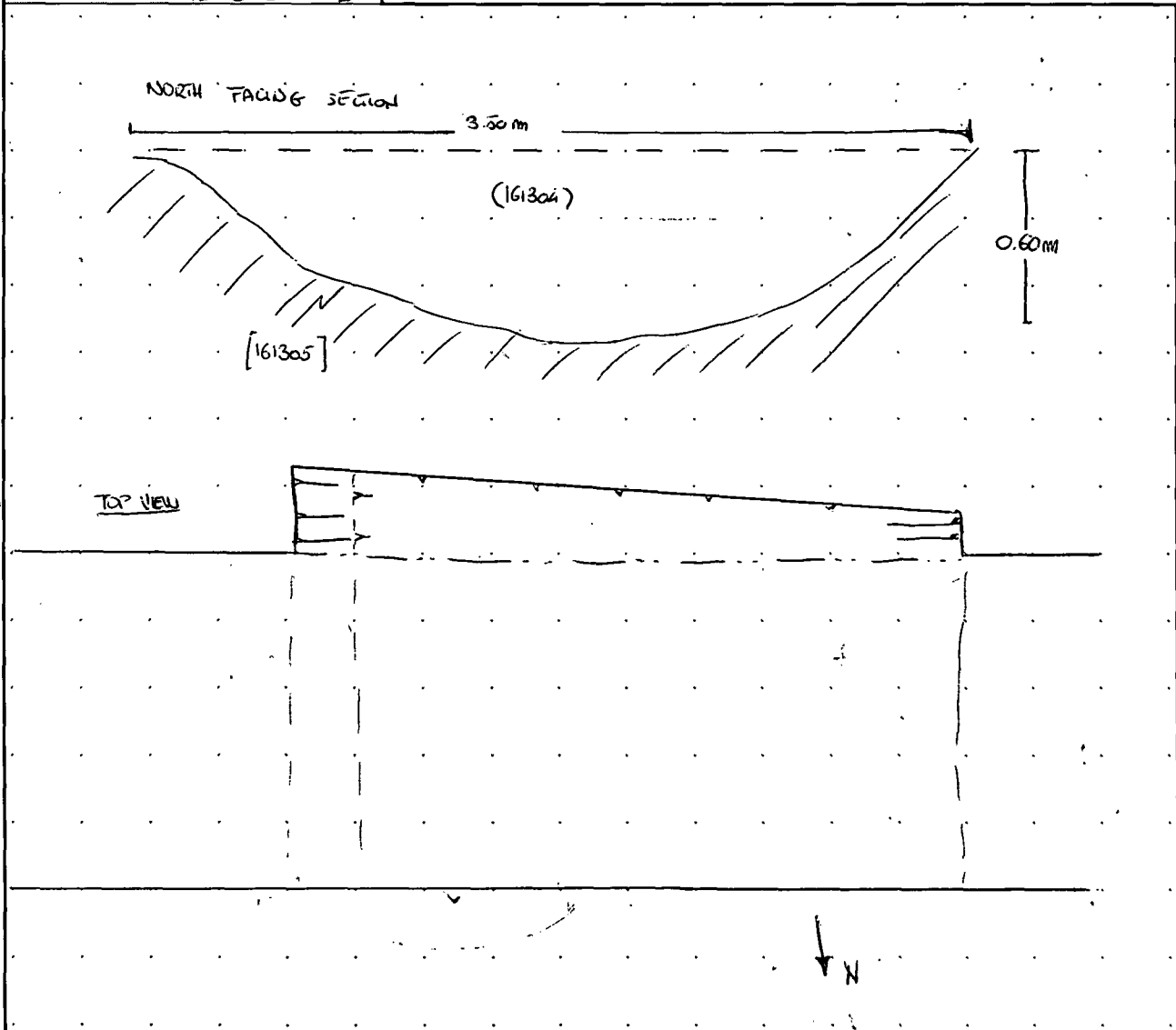
OBSERVED AND RECORDED VIA AN EVALUATION SLOT (4.00 x 3.50 m APPROX)

WESTERN EDGE OF THE CUT VERY MIXED ~~THE CUT IS A MIXED MATERIAL OF SOIL AND ROCK AND IS NOT A DUG~~

Refer to context [161305]

## 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 16</b> | Sub-area/Trench<br><b>—</b>     | Context number<br><b>161306</b>                                                                                        |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>        | Parent context<br><b>161306</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                                                     |
|--|--|---------------|--|--|-----------------------------------------------------|
|  |  | <b>161307</b> |  |  | Same as context <input checked="" type="checkbox"/> |
|  |  | <b>161306</b> |  |  | Cuts context <b>161003</b>                          |
|  |  | <b>161003</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"/> |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |              |                 | pit <input type="checkbox"/><br>post-hole <input checked="" type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br><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 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><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> | <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"/> | <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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|                        |                       |                                               |                                                                                                                                                          |
|------------------------|-----------------------|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>—</b> | Finds nos<br><b>—</b> | Photo nos<br><b>1610619</b><br><b>1610632</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>17 16207</b> |
|------------------------|-----------------------|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☒ use ☐ disuse ☐

|            |                 |
|------------|-----------------|
| Date       | <b>23.01.18</b> |
| Initials   | <b>AM JH</b>    |
| Checked by |                 |

# ADDITIONAL INFORMATION

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

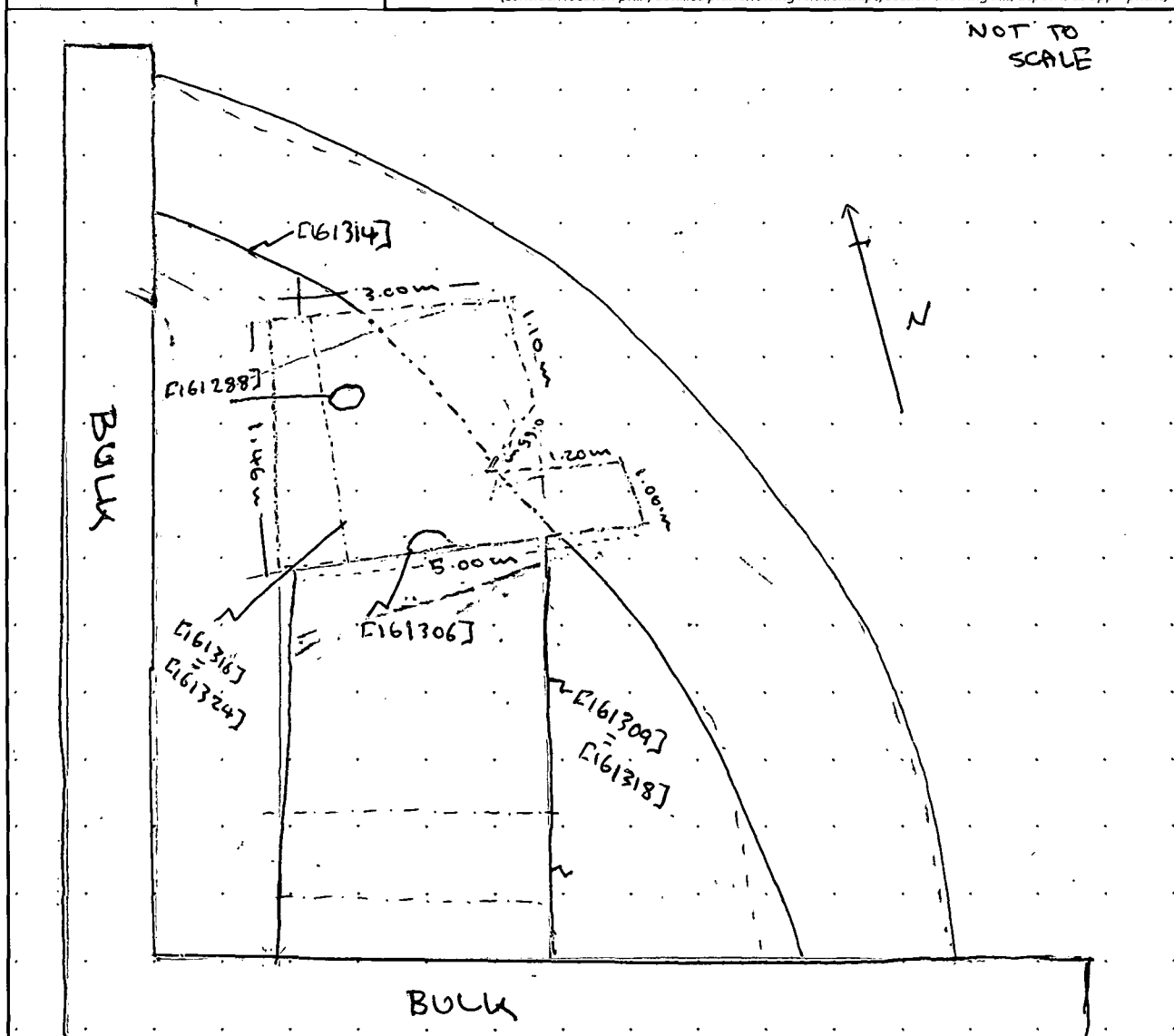
Cut of a possible post hole in the base of N-S ditch [161309], likely to have been constructed during the construction of the ditch.

Cut into a heavy-greenish clay which is the natural  
No finds within the fills.

Refer to context 161314

## SKETCHES

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



## STRATIGRAPHY

|  |  |        |  |  |                 |   |
|--|--|--------|--|--|-----------------|---|
|  |  | 161321 |  |  | Same as context | — |
|  |  | 161307 |  |  | Cuts context    | — |
|  |  | 161306 |  |  | Cut-by context  | — |

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

## INTERPRETATION

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

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

## INTERPRETATION

| Compaction                                                        |                                                                                                                              | Colour                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                              | Composition                                                              |                                                                                                                                                                                                                                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input type="checkbox"/> moderately compact<br><input checked="" 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"/> | <input type="checkbox"/> brownish <input type="checkbox"/> brown<br><input type="checkbox"/> greyish <input checked="" type="checkbox"/> grey<br><input type="checkbox"/> orangeish <input type="checkbox"/> orange<br><input type="checkbox"/> yellowish <input type="checkbox"/> yellow<br><input type="checkbox"/> reddish <input type="checkbox"/> red<br><input type="checkbox"/> blueish <input type="checkbox"/> blue | clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay | <input checked="" type="checkbox"/> silty <input type="checkbox"/> silt<br><input type="checkbox"/> sandy <input type="checkbox"/> sand<br><input type="checkbox"/> gravelly <input type="checkbox"/> gravel<br><input type="checkbox"/> peaty <input type="checkbox"/> peat |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> moderately compact                       |                                                                                                                              |                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                          |                                                                                                                                                                                                                                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input checked="" type="checkbox"/> loose                         |                                                                                                                              |                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                          |                                                                                                                                                                                                                                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> friable                                  |                                                                                                                              |                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                          |                                                                                                                                                                                                                                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                                                                                                              |                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                          |                                                                                                                                                                                                                                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                                                                                                              |                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                          |                                                                                                                                                                                                                                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0-30                                                              |                                                                                                                              | —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                                                                                                                            |                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                          |                                                                                                                                                                                                                                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 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) ☒

**FILL OF POST-1702**

### Basic process

| Sample nos | Finds nos | Photo nos               | Drawing nos                                                                                                                           | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|------------|-----------|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| /          | /         | 1610619<br>↓<br>1610632 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><br>D 16207 | Date 23.01.18<br>Initials AM/JH<br>Checked by                                                                 |

# ADDITIONAL INFORMATION

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

Fill of possible post-hole.  
Likely to be the result of the construction of the  
N-S ditch which may have removed the post leaving  
it to infill with silt.  
No significant find or inclusions.

Refer to context

161314  
161306

## 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 16</b> | Sub-area/Trench<br><b>—</b>     | Context number<br><b>161309</b>                                                                                        |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>        | Parent context<br><b>161309</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |                 |  |                               |
|--|--|---------------|-----------------|--|-------------------------------|
|  |  | <b>161325</b> |                 |  | Same as context <b>161318</b> |
|  |  | <b>161309</b> | <b>= 161318</b> |  | Cuts context <b>161321</b>    |
|  |  | <b>161321</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 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="text"/> |
| <b>Orientation</b><br>I <input checked="" type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW*<br>I <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                     | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input 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 checked="" type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input checked="" type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |                              |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br><b>2.77m</b>                                                                                                                                                                                                                                                                                  | <b>Width</b><br><b>2.80m</b>                                                                                                                                                                                                                             | <b>Depth</b><br><b>0.80m</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 checked="" 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

|                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <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="text"/> |
| <b>Thickness</b><br>                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <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<br><b>—</b> | Finds nos<br><b>—</b> | Photo nos<br><b>1616619</b><br><b>1616632</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16207</b> |
|------------------------|-----------------------|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>23.01.18</b>                                                                                          |
| Initials <b>AM/JH</b>                                                                                         |
| Checked by <b>—</b>                                                                                           |



# ADDITIONAL INFORMATION

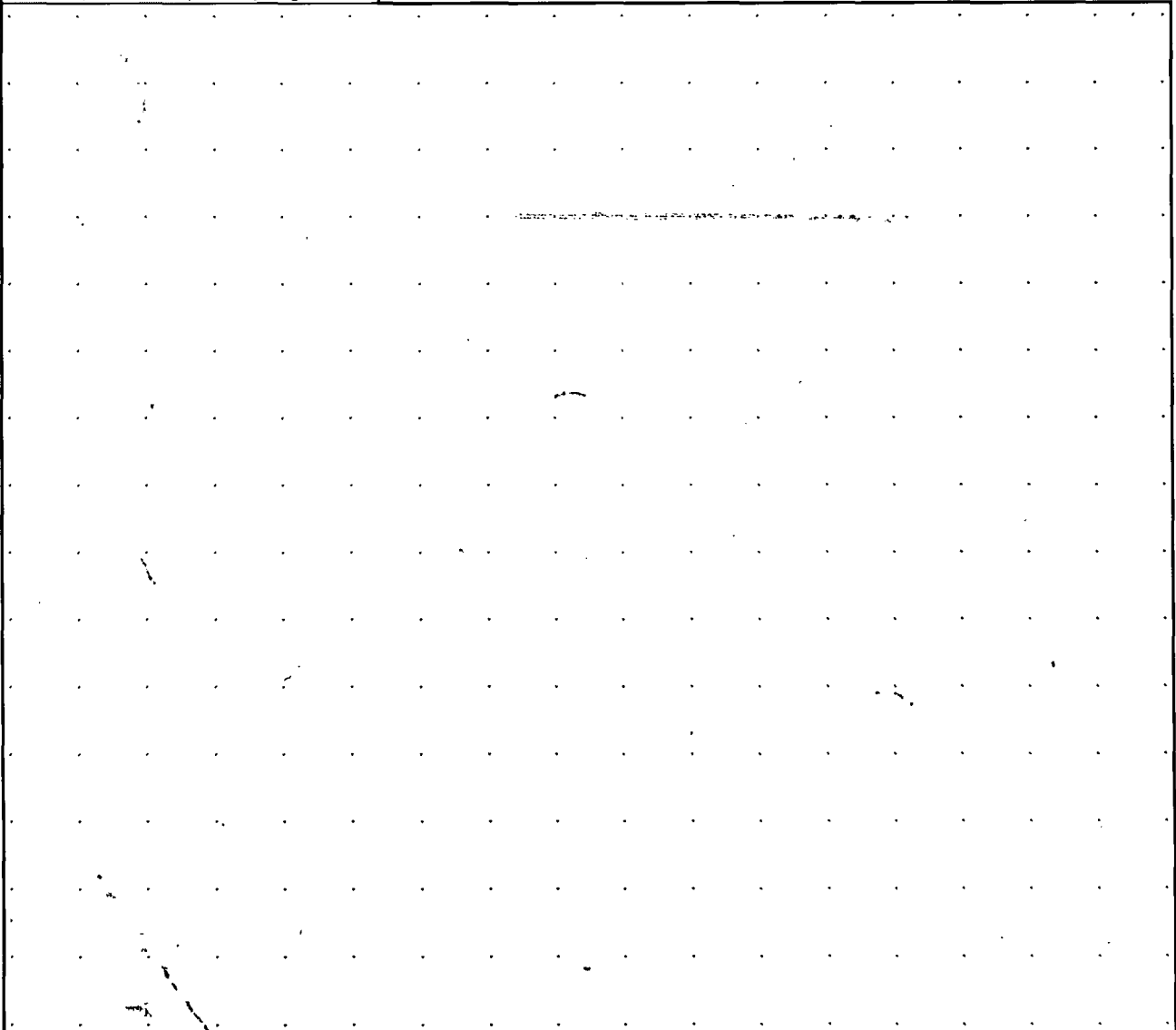
(any further details that may be important for understanding the context, including items marked \* overleaf)

Cut of the N-S linear which ~~for~~ is truncated by the re-cut [161314] as the RING-PITCH.  
 It's edges rise up to 0.40m below the top of the slot and then flatten out, going underneath the E and W facing section.  
 Cuts through a possible-post-hole near the base of the feature.  
 Also represented in the SF facing section as [161318]  
 A pit was cut through it's top fill as well as a re-cut [1613~~24~~24] = [161316]  
 Lithic finds suggest a Bronze-Age date.

Refer to context | 161314  
 161306.

## SKETCHES

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





|                         |                             |                                 |                                                                                                                        |
|-------------------------|-----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>FEA 16</b> | Sub-area/trench<br><b>—</b>     | Context number<br><b>161310</b>                                                                                        |
| ECB#<br><b>—</b>        | Subgroup<br><b>—</b>        | Parent context<br><b>161309</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |               |                 |  |                 |               |
|--|--|---------------|-----------------|--|-----------------|---------------|
|  |  | <b>161312</b> | <b>= 161402</b> |  | Same as context | <b>161320</b> |
|  |  | <b>161310</b> | <b>= 161320</b> |  | Cuts context    | <b>—</b>      |
|  |  | <b>161322</b> | <b>= 161319</b> |  | Cut by context  | <b>—</b>      |

**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 checked="" type="checkbox"/> NE-SW<br><input checked="" type="checkbox"/> NW-SE<br><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* | <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"/>                                                                       |                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                    |              |                 |

- ☐ 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**

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

|                   |                  |                                      |                                                                                                                                         |
|-------------------|------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| <b>Sample nos</b> | <b>Finds nos</b> | <b>Photo nos</b>                     | <b>Drawing nos</b>                                                                                                                      |
|                   |                  | <b>1610619</b><br>↓<br><b>161632</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16207</b> |

**Basic process**

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>23.01.18</b>                                                                                          |
| Initials <b>AM/jh</b>                                                                                         |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

Gravel tip-line being washed in to ditch [161309] from the west.

Similar in composition to (161325).

No significant finds or inclusion

Represented in the south facing section by (161320)

Refer to context 161314  
161306.

## SKETCHES

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

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                                 |                                                                                                                        |
|-------------------------|-----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>114</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>—</b>     | Context number<br><b>161311</b>                                                                                        |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>        | Parent context<br><b>16130a</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                          |
|--|--|---------------|--|--|--------------------------|
|  |  | <b>161401</b> |  |  | Same as context <b>—</b> |
|  |  | <b>161311</b> |  |  | Cuts context <b>—</b>    |
|  |  | <b>161325</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><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 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"/> <input checked="" type="checkbox"/> brown<br>greyish <input type="checkbox"/> <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input checked="" type="checkbox"/> <input type="checkbox"/> red<br>blueish <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 | 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>0.16m</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<br><b>—</b> | Finds nos<br><b>—</b> | Photo nos<br><b>1610619</b><br><b>↓</b><br><b>1610632</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>16207</b> |
|------------------------|-----------------------|-----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>23.01.18</b>                                                                                          |
| Initials <b>AM JH</b>                                                                                         |
| Checked by <b>—</b>                                                                                           |

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

# ADDITIONAL INFORMATION

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

Small patch of erosion from the east bank of [161309].  
Physically cut by the re-cut of ring ditch [161314].  
No significant finds or inclusions.  
Inlined from the East side of the ditch.

Refer to context

161314  
161306.

## SKETCHES

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

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                  |                      |                          |                                                                                                                        |
|------------------|----------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>H14 | Area/Field<br>TEA 16 | Sub-area/Trench<br>-     | Context number<br>161312                                                                                               |
| ECB#<br>-        | Subgroup<br>-        | Parent context<br>161309 | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|                 |                 |  |                                 |
|-----------------|-----------------|--|---------------------------------|
| 161316          | 161288          |  | Same as context 161402.         |
| 161324 =        | 161312 = 161402 |  | Cuts context                    |
| 161320 = 161310 |                 |  | Cut by context 161288<br>161316 |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                               |              |                 | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                      | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input type="checkbox"/> steep<br>L <input type="checkbox"/> moderate } sloping<br>L <input type="checkbox"/> gentle<br>L <input type="checkbox"/> stepped<br>L <input type="checkbox"/> undercutting<br>L <input type="checkbox"/> complex* | <b>Base</b><br>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 checked="" type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input checked="" type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>0.40m                                                                                                                                                             | 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                                                                                                                                                                                                                                                                                                                                                  | bulk find                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

## CROSS REFERENCE

|                 |                      |                                      |                                                                                                                                                 |
|-----------------|----------------------|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>/ | Finds nos<br>F161304 | Photo nos<br>1610619<br>↓<br>1610632 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16207 |
|-----------------|----------------------|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date 23.01.18                                                                                                 |
| Initials AM. JH                                                                                               |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

A large silting event which puts the ditch out of use  
~~the~~ until it is re-cut by F161316 = F161324.  
 Seemingly infilled from the East and is represented  
 in the North facing section.

Polished axe-fragment found (see below)

A fair amount of debitage and flint flakes

likely to be bronze-age in date.

Represented in the south facing section by (161402)

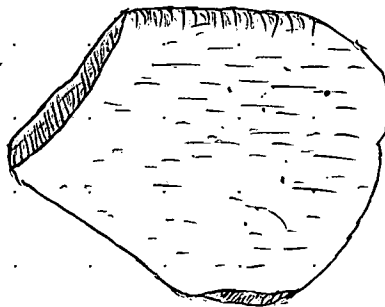
Refer to context

161314  
 161306.

## SKETCHES

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

1:1 scale sketch of polished-axe fragment



^  
 F16304



## STRATIGRAPHY

|  |  |        |   |        |                 |        |
|--|--|--------|---|--------|-----------------|--------|
|  |  | 161002 |   |        | Same as context | 161317 |
|  |  | 161313 | = | 161317 | Cuts context    |        |
|  |  | 161324 |   |        | 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><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div>           sloping         </div> </div> |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape: result of</b> (tick all that apply)<br>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 type="checkbox"/> clay            |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> friable                       | brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown                                                           |                          | silty <input type="checkbox"/>            | <input checked="" type="checkbox"/> silt |
|                                                                   |                                                        | greyish <input checked="" type="checkbox"/> <input type="checkbox"/> grey                                                             |                          | sandy <input 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"/>           |                                          |
| 0.47m                                                             |                                                        |                                                                                                                                       |                          |                                           |                                          |
| Inclusions                                                        |                                                        |                                                                                                                                       |                          |                                           |                                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                                | chalk                                                                                                                                 | iron pan                 | manganese                                 | charcoal                                 |
|                                                                   |                                                        |                                                                                                                                       |                          |                                           | plant remains*                           |
|                                                                   |                                                        |                                                                                                                                       |                          |                                           | wood                                     |
|                                                                   |                                                        |                                                                                                                                       |                          |                                           | marine shell                             |
|                                                                   |                                                        |                                                                                                                                       |                          |                                           | bone*                                    |
|                                                                   |                                                        |                                                                                                                                       |                          |                                           | pot                                      |
|                                                                   |                                                        |                                                                                                                                       |                          |                                           | fired clay / CBM                         |
|                                                                   |                                                        |                                                                                                                                       |                          |                                           | CTP                                      |
|                                                                   |                                                        |                                                                                                                                       |                          |                                           | mortar/plaster                           |
|                                                                   |                                                        |                                                                                                                                       |                          |                                           | leather/textile                          |
|                                                                   |                                                        |                                                                                                                                       |                          |                                           | glass                                    |
|                                                                   |                                                        |                                                                                                                                       |                          |                                           | metal                                    |
|                                                                   |                                                        |                                                                                                                                       |                          |                                           | industrial waste                         |
|                                                                   |                                                        |                                                                                                                                       |                          |                                           | lithics                                  |
|                                                                   |                                                        |                                                                                                                                       |                          |                                           | coarse stone                             |
| frequency                                                         |                                                        |                                                                                                                                       |                          |                                           |                                          |
| bulk find                                                         | <input type="checkbox"/>                               | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/>                  | <input type="checkbox"/>                 |

### Basic process

| Sample nos | Finds nos | Photo nos           | Drawing nos                                                                                                                        |
|------------|-----------|---------------------|------------------------------------------------------------------------------------------------------------------------------------|
|            |           | 1610619-<br>1610632 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 16207. |

# ADDITIONAL INFORMATION

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

Fill containing charcoal inclusions.

Refer to context

1161304  
1161306

## SKETCHES

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

## STRATIGRAPHY

|  |        |        |  |  |                 |                 |
|--|--------|--------|--|--|-----------------|-----------------|
|  | 161315 | 161002 |  |  | Same as context | ✓               |
|  |        | 161314 |  |  | Cuts context    | 161317 + 161291 |
|  | 161317 | 161291 |  |  | 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 checked="" type="checkbox"/> NW-SE                                                    |                         | <b>Sides</b><br> <input checked="" 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 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* |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br>3.03 m | <b>Width</b><br>1.60 m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Depth</b><br>0.24 m | <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

[illegible]

## CROSS REFERENCE

| Sample nos                                                                          | Finds nos                                                                           | Photo nos                                | Drawing nos                                                                                                                       |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
|  |  | <del>161061</del><br>1610519-<br>1610632 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 16207 |

### Basic process

construction ☒ use ☐ disuse ☐

Date: 23/01/18

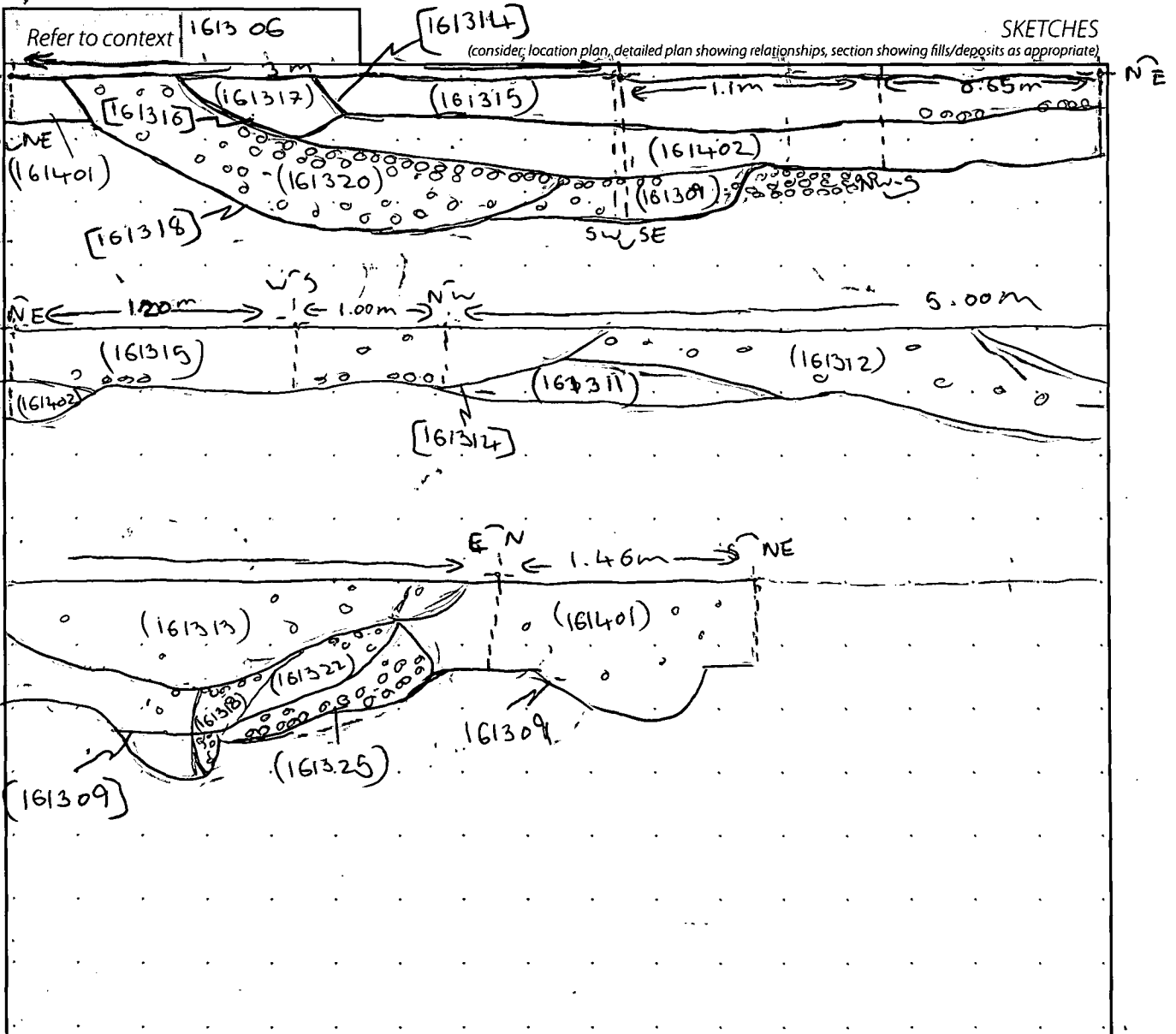
Initials: JH/AM

Checked by:

# ADDITIONAL INFORMATION

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

Recut of the outer-ditch [161314] NW-SE cutting the inner ditch of the barrow [161316] N-S.



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                  |                      |                          |                                                                                                                        |
|------------------|----------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>AIL | Area/Field<br>TEA 16 | Sub-area/Trench<br>1     | Context number<br>161315                                                                                               |
| ECB #            | Subgroup             | Parent context<br>161314 | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |        |  |  |                 |                                     |
|--|--|--------|--|--|-----------------|-------------------------------------|
|  |  | 161002 |  |  | Same as context | <input checked="" type="checkbox"/> |
|  |  | 161315 |  |  | Cuts context    | <input checked="" type="checkbox"/> |
|  |  | 161314 |  |  | 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>[ <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 type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |  | <b>Composition</b><br>clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat |  | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |  |
| <b>Thickness</b><br>0-2.3m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | 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 checked="" 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                                                                                                            |
|            |           | 160619-<br>160632 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date 23/01/18                                                                                                 |
| Initials SH/AM                                                                                                |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

Fill (161315) of cut of outer ditch [161314]. moderate amount of lithics found.

Refer to context 161314  
161306

## 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 16</b> | Sub-area/Trench<br><b>/</b>     | Context number<br><b>161316</b>                                                                                        |
| ECB#<br><b>/</b>        | Subgroup<br><b>/</b>        | Parent context<br><b>161316</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                   |        |  |                        |
|--|--|-------------------|--------|--|------------------------|
|  |  | 161317            |        |  | Same as context 161324 |
|  |  | 161316            |        |  | Cuts context           |
|  |  | <del>161318</del> | 161312 |  | 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 checked="" 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 checked="" type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                      | <b>Sides</b><br>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 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>2.14m                                                                                                                                                                                                                                                                                         | <b>Width</b><br>2.16m                                                                                                                                                                                                                                    | <b>Depth</b><br>0.47m | <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 checked="" 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                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| frequency                                                                                                                                                                  | 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                                                                                                                                                                                                                                                                                                                                                                                                                  | bulk find                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|                        |                       |                                               |                                                                                                                                                        |
|------------------------|-----------------------|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>/</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610619</b><br><b>1610632</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16207</b> |
|------------------------|-----------------------|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>23/01/18</b>                                                                                          |
| Initials <b>SH/AM</b>                                                                                         |
| Checked by <b>/</b>                                                                                           |



# ADDITIONAL INFORMATION

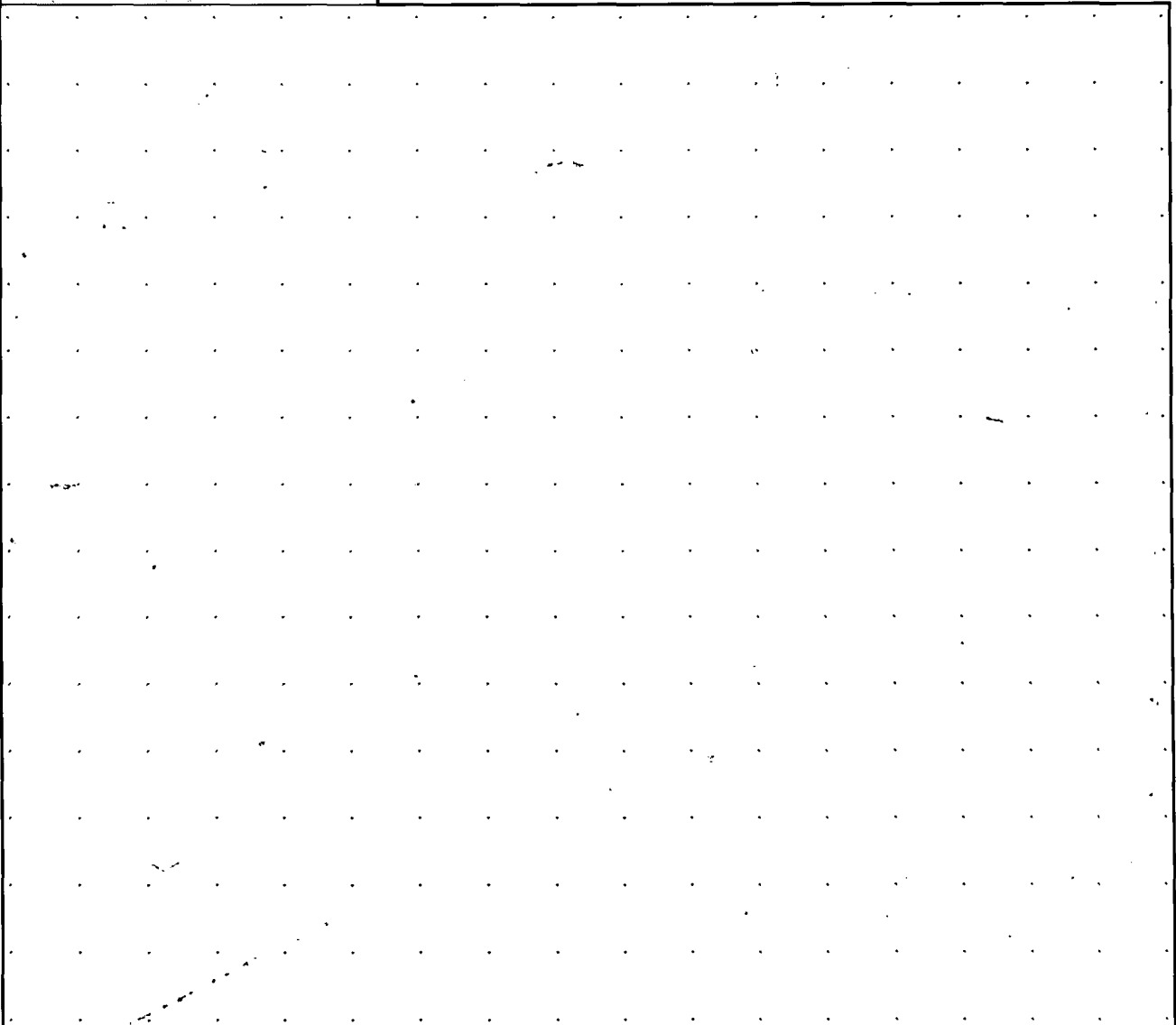
(any further details that may be important for understanding the context, including items marked \* overleaf)

Cut of the inner ditch of the barrow N-S [161316]. This has been truncated by [161314] to the East so full extent is unknown. Width of ditch has been ~~taken~~ measured from cut on S facing section. Extent of cut [161316] may have also been affected by natural erosion as seen through the gravel tip-line

Refer to context 161314  
161306

## SKETCHES

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



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                  |                      |                          |                                                                                                                        |
|------------------|----------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/field<br>TEA 16 | Sub-area/Trench          | Context number<br>161317                                                                                               |
| ECB.#            | Subgroup             | Parent context<br>161316 | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |        |          |  |                        |
|--|--|--------|----------|--|------------------------|
|  |  | 161314 |          |  | Same as context 161313 |
|  |  | 161317 | = 161313 |  | Cuts context *         |
|  |  | 161316 |          |  | Cut by context 161314  |

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

### CROSS REFERENCE

|            |           |                      |                                                                                                                                  |
|------------|-----------|----------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos            | Drawing nos                                                                                                                      |
|            |           | 1610619 -<br>1610632 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>DIS267 |

### Basic process

|                                       |                              |                                            |
|---------------------------------------|------------------------------|--------------------------------------------|
| construction <input type="checkbox"/> | use <input type="checkbox"/> | disuse <input checked="" type="checkbox"/> |
| Date                                  | 23/01/16                     |                                            |
| Initials                              | SH/AM                        |                                            |
| Checked by                            |                              |                                            |

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 (161317) containing charred inclusions

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

[illegible]

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                  |                      |                           |                                                                                                                        |
|------------------|----------------------|---------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA 16 | Sub area/Trench<br>-      | Context number<br>161318                                                                                               |
| ECB #<br>-       | Subgroup<br>-        | Parent context<br>E161309 | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |        |
|--|--|-----------------|--|--|-----------------|--------|
|  |  | 161325          |  |  | Same as context | 161309 |
|  |  | 161318 = 161309 |  |  | Cuts context    | 161321 |
|  |  | 161321          |  |  | 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<br>                                                                                                                      | <b>Sides</b><br>2 <input type="checkbox"/> vertical<br>2 <input type="checkbox"/> steep<br>2 <input type="checkbox"/> moderate sloping<br>2 <input type="checkbox"/> gentle<br>2 <input type="checkbox"/> stepped<br>2 <input type="checkbox"/> undercutting<br>2 <input checked="" 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><br>2.77 m                                                                                                                                                                                                                                                                                        | <b>Width</b><br>2.80 m                                                                                                                                                                                                                        | <b>Depth</b><br>0.80 m | <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 checked="" 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

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

|            |           |                    |                                                                                                                                  |
|------------|-----------|--------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos          | Drawing nos                                                                                                                      |
|            |           | 1610619<br>1610632 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16207 |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date 23.01.18                                                                                                 |
| Initials AM-JH                                                                                                |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

Same cut of ditch as [161309], but represented in the SE Facing section. The west edge has a more gentle incline likely due to erosion and the slumping of the natural gravels (161320) + (161319).

Likely to be Bronze Age in date.

Refer to context

161314  
161306

## SKETCHES

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

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                  |                      |                          |                                                                                                                        |
|------------------|----------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>D14 | Area/Field<br>TSA 16 | Sub-area/Trench<br>C     | Context number<br>161319                                                                                               |
| ECB#             | Subgroup             | Parent context<br>161309 | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|        |                 |        |                           |
|--------|-----------------|--------|---------------------------|
| 161310 | 161319 = 161322 | 161401 | Same as context<br>161322 |
|        |                 |        | Cuts context              |
|        |                 |        | Cut by context            |

## CUT

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

## DESCRIPTION

## INTERPRETATION

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

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input 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 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 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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |                                      |                                                                                                                                                 |
|------------|-----------|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos<br>1610619<br>↓<br>1610632 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16207 |
|------------|-----------|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date<br>23.01.18                                                                                              |
| Initials<br>JH JH                                                                                             |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

Representation of (161322) in the South facing section  
 A tip-line of gravel being worked in from the  
 West edge.  
 No significant finds or inclusions.

Refer to context

161314  
 161306.

## SKETCHES

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



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                       |                      |                          |                                                                                                                        |
|-----------------------|----------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 FFAF | Area/Field<br>TEA 16 | Sub-area/Trench<br>—     | Context number<br>161320                                                                                               |
| ECB#<br>—             | Subgroup<br>—        | Parent context<br>161309 | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|                 |                           |
|-----------------|---------------------------|
| 161312 = 161402 | Same as context<br>161310 |
| 161320 = 161310 | Cuts context<br>—         |
| 161322 = 161319 | Cut by context<br>—       |

## CUT

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

## DESCRIPTION

## INTERPRETATION

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

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input 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 checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input 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>0.40m                                                                                                                                                                                                                       | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | bulk find                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|                 |                |                                      |                                                                                                                                                 |
|-----------------|----------------|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>— | Finds nos<br>— | Photo nos<br>1610619<br>↓<br>1610632 | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16207 |
|-----------------|----------------|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☐ disuse ☐

Date 23.01.18  
Initials AM/FL  
Checked by

# ADDITIONAL INFORMATION

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

large gravel tip-line associated with the erosion of the west. bank.

Due to its similarity with (161310) it was established that it represented this fill but in the South facing section

No significant finds or inclusions.

Refer to context

161314  
161306

## 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 16</b> | Sub-area/Trench<br><b>—</b>     | Context number<br><b>161321</b>                                                                                        |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>        | Parent context<br><b>161306</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                                                     |
|--|--|---------------|--|--|-----------------------------------------------------|
|  |  | <b>161309</b> |  |  | Same as context <input checked="" type="checkbox"/> |
|  |  | <b>161321</b> |  |  | Cuts context <input checked="" type="checkbox"/>    |
|  |  | <b>161307</b> |  |  | Cut by context <b>161309</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 <input checked="" 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>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                            | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown<br>greyish <input type="checkbox"/> <input type="checkbox"/> grey<br>orangeish <input 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 type="checkbox"/> clay<br>silty <input type="checkbox"/> <input type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input checked="" 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 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><b>0.25m</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<br><b>—</b> | Finds nos<br><b>—</b> | Photo nos<br><b>1610619</b><br><b>↓</b><br><b>1610632</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16207</b> |
|------------------------|-----------------------|-----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>23.01.18</b>                                                                                          |
| Initials <b>AMJH</b>                                                                                          |
| Checked by <b>—</b>                                                                                           |

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

# ADDITIONAL INFORMATION

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

Packing layer used for the securing of a possible timber post.

No significant finds or inclusions.

Possibly re-used material taken from the gravelly patches of natural.

Refer to context

161314  
161306

## 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 16</b> | Sub-area/Trench<br><b>-</b>     | Context number<br><b>161322</b>                                                                                        |
| ECB#                    | Subgroup                    | Parent context<br><b>161309</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |                |  |                               |
|--|--|---------------|----------------|--|-------------------------------|
|  |  | <b>161310</b> |                |  | Same as context <b>161319</b> |
|  |  | <b>161322</b> | <b>=161319</b> |  | Cuts context                  |
|  |  | <b>161401</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<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"/> <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 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 checked="" 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>0.22m</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                                                                                                                             |
|            |           | <b>1610619</b><br>↓<br><b>1610632</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16207</b> |

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>23.01.18</b><br>Initials <b>AM. Jh</b><br>Checked by                                                  |

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

# ADDITIONAL INFORMATION

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

Tip-line of gravel, mixed with silt. Associated with the erosion of the west bank, ~~and~~ similar in composition to (161310).  
 Represented in the South facing section as (161319).  
 No significant finds or inclusions

Refer to context

161314  
 161306

## 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 16</b> | Sub-area/Trench<br><b>/</b>     | Context number<br><b>161324</b>                                                                                        |
| ECB#<br><b>/</b>        | Subgroup<br><b>/</b>        | Parent context<br><b>161316</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                               |
|--|--|---------------|--|--|-------------------------------|
|  |  | <b>161313</b> |  |  | Same as context <b>161316</b> |
|  |  | <b>161324</b> |  |  | Cuts context                  |
|  |  | <b>161312</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 checked="" 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>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 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>U <input checked="" type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input checked="" type="checkbox"/> uneven<br>X <input type="checkbox"/> complex* |                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br><b>2.14m</b>                                                                                                                                                                                                                                                                                  | <b>Width</b><br><b>2.16m</b>                                                                                                                                                                                                                                        | <b>Depth</b><br><b>0.47m</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"/> | <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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| stones* <input type="checkbox"/> chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/> manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/> plant remains* <input type="checkbox"/><br>wood <input type="checkbox"/> marine shell <input type="checkbox"/><br>bone* <input type="checkbox"/> pot <input type="checkbox"/><br>fired clay / CBM <input type="checkbox"/> CTP <input type="checkbox"/><br>mortar/plaster <input type="checkbox"/> leather/textile <input type="checkbox"/><br>glass <input type="checkbox"/> metal <input type="checkbox"/><br>industrial waste <input type="checkbox"/> lithics <input type="checkbox"/><br>coarse stone <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>frequency</b><br>bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|                                                                                                                        |                       |                                     |                              |
|------------------------------------------------------------------------------------------------------------------------|-----------------------|-------------------------------------|------------------------------|
| Sample nos<br><b>/</b>                                                                                                 | Finds nos<br><b>/</b> | Photo nos<br><b>1610619-1610632</b> | Drawing nos<br><b>D16207</b> |
| Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |                       |                                     |                              |

## Basic process

construction ☐ use ☐ disuse ☐

Date **23/01/19**

Initials **JH/AM**

Checked by



# ADDITIONAL INFORMATION

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

Due to the compaction, material and location we consider this ditch to N facing section of this ditch [161326] to be a continuation of the S facing ditch section [161316]

Refer to context

161314  
161306

## SKETCHES

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



|                         |                              |                                 |                                                                                                                        |
|-------------------------|------------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/field<br><b>TEA. 16</b> | Sub-area/trench<br><b>—</b>     | Context number<br><b>161325</b>                                                                                        |
| EGB#                    | Subgroup<br><b>—</b>         | Parent context<br><b>161309</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |               |  |  |                 |          |
|--|--|---------------|--|--|-----------------|----------|
|  |  | <b>161311</b> |  |  | Same as context | <b>—</b> |
|  |  | <b>161325</b> |  |  | Cuts context    | <b>—</b> |
|  |  | <b>161309</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><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br>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><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 checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input 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>0.38m</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| stones* <input type="checkbox"/><br>chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/><br>manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/><br>plant remains* <input type="checkbox"/><br>wood <input type="checkbox"/><br>marine shell <input type="checkbox"/><br>bone* <input type="checkbox"/><br>pot <input type="checkbox"/><br>fired clay / CBM <input type="checkbox"/><br>CTP <input type="checkbox"/><br>mortar/plaster <input type="checkbox"/><br>leather/textile <input type="checkbox"/><br>glass <input type="checkbox"/><br>metal <input type="checkbox"/><br>industrial waste <input type="checkbox"/><br>lithics <input type="checkbox"/><br>coarse stone <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency<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<br><b>—</b> | Finds nos<br><b>—</b> | Photo nos<br><b>1610619</b><br><b>↓</b><br><b>1610632</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16207</b> |
|------------------------|-----------------------|-----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

**Basic process**

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>23.01.18</b>                                                                                          |
| Initials <b>AM-JH</b>                                                                                         |
| Checked by <b>—</b>                                                                                           |

# ADDITIONAL INFORMATION

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

Infill of ~~the~~ ditch. Likely due to the erosion of the gravelly patches found on the west edge.

Represented in the N facing section as a clear tip line.

No finds or significant inclusions

Refer to context 161314  
161306.

## 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>TEA16</b> | Sub-area/Trench<br><b>TEA15-BARR</b> | Context number<br><b>161326</b>                                                                                        |
| ECB#                    | Subgroup                   | Parent context<br><b>C161327</b>     | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |        |  |   |                 |
|--|--|--------|--|---|-----------------|
|  |  | 160002 |  |   | Same as context |
|  |  | 161326 |  |   | Cuts context    |
|  |  | 161327 |  | 4 | 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                                                                                                                                                                                                                                                               |  | 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 type="checkbox"/> friable |                                                                                                                                                                                                                                                 | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |  | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input 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 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>UPTO 0.40m                                                                                                                                                        |                                                                                                                                                                                                                                                 | 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>GTP<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<br><b>16226</b> | Findings nos<br><b>0</b> | Photo nos<br><b>1610652 0982</b><br><b>1610653 0983</b><br><b>1610654 0984</b><br><b>1610655 0985</b> | Drawing nos<br><b>#20</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. 16225</b> |
|----------------------------|--------------------------|-------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                                                |                                                             |
|--------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| <input checked="" type="checkbox"/> construction<br><input type="checkbox"/> use<br><input checked="" type="checkbox"/> disuse | Date: <b>22/1/18</b><br>Initials: <b>HCB</b><br>Checked by: |
|--------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|

# ADDITIONAL INFORMATION

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

FIN OF ENCLOSURE DITCH [161327]

Refer to context

[161327]

## SKETCHES

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

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                               |                            |                                       |                                                                                                                        |
|-------------------------------|----------------------------|---------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 TPA16</b> | Area/Field<br><b>TPA16</b> | Sub-area/Trench<br><b>TPA15-B1440</b> | Context number<br><b>161327</b>                                                                                        |
| ECB #                         | Subgroup                   | Parent context<br><b>C161327J</b>     | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |            |  |                 |
|--|--|---------------|------------|--|-----------------|
|  |  | <b>161326</b> |            |  | Same as context |
|  |  | <b>161327</b> |            |  | Cuts context    |
|  |  | <b>160003</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 type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                              |                 | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input checked="" type="checkbox"/> <b>ENCLOSURE DITCH?</b> |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input checked="" type="checkbox"/> E-W<br><input checked="" 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* | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br><b>0.93m</b>                                                                                                                                                                                                                                                            | <b>Width</b><br><b>0.53m</b>                                                                                                                                                                                                                 | <b>Depth</b><br><b>0.40m</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"/> | <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                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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 <b># 20</b>                                                                                                                   |
| <b>X</b>   | <b>X</b>  | <b>1610652 0982</b><br><b>1610653 0983</b><br><b>1610654 0984</b><br><b>1610655 0985</b><br><b>1610733 0985</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. 16225</b> |

## Basic process

construction ☐ use ☐ disuse ☐

|            |                |
|------------|----------------|
| Date       | <b>22/1/18</b> |
| Initials   | <b>HCB</b>     |
| Checked by |                |

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

# ADDITIONAL INFORMATION

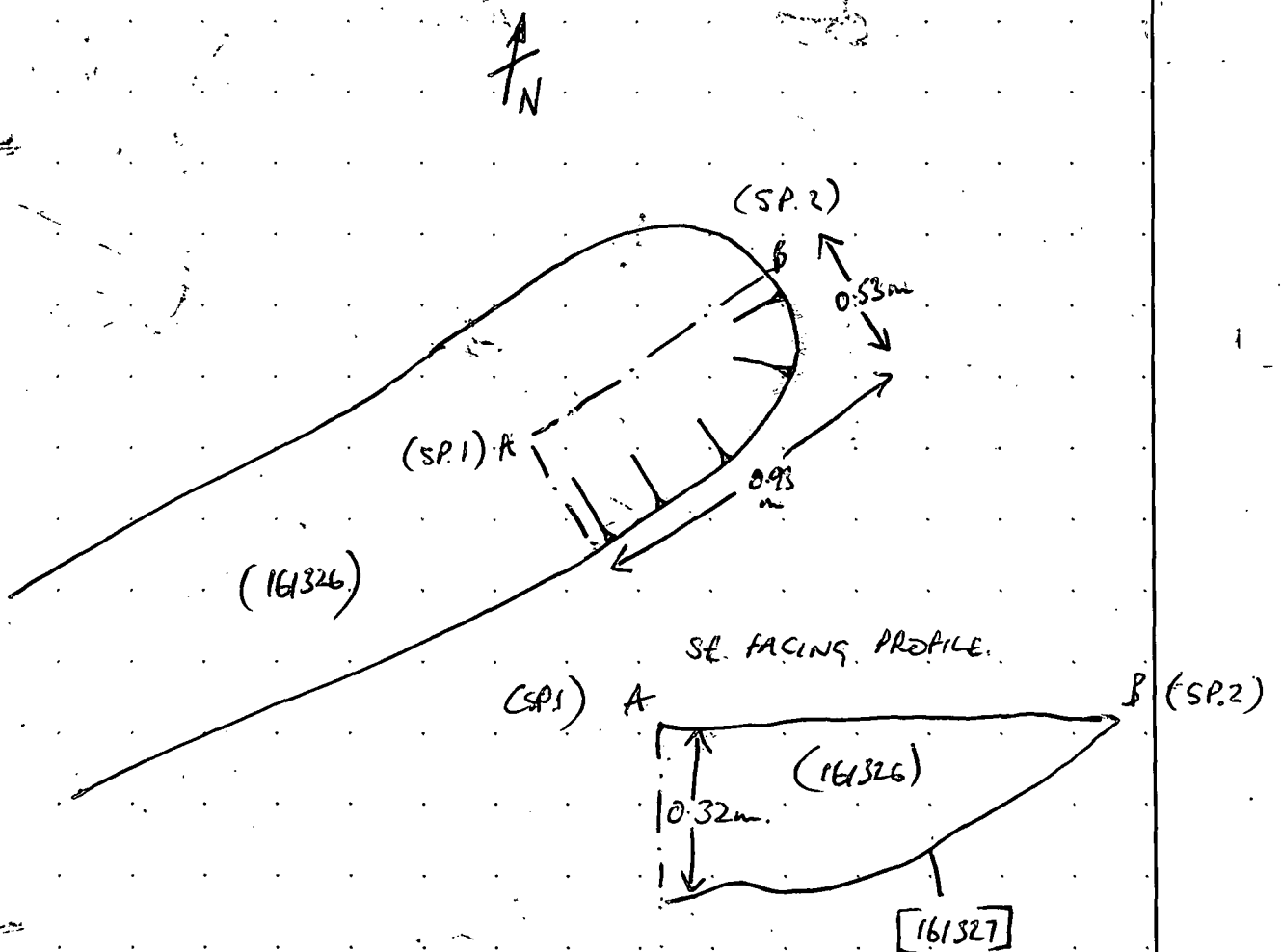
(any further details that may be important for understanding the context, including items marked \* overleaf)

TERMINUS OF ENCLOSURE DITCH

Refer to context (161326)

## SKETCHES

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







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

|            |            |                 |                                                                                                        |
|------------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code  | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14-TEA 16 | TEA 16     | TEA 15-B464     | 1613.28                                                                                                |
| ECB.#      | Subgroup   | Parent context  | @context type                                                                                          |
|            |            | E161328J        | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |        |  |  |                 |   |
|--|--|--------|--|--|-----------------|---|
|  |  | 161324 |  |  | Same as context |   |
|  |  | 161328 |  |  | Cuts context    | ✓ |
|  |  | 160003 |  |  | 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 checked="" type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                         |                      | <b>Sides</b><br><input type="checkbox"/> vertical<br><input checked="" type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |                      | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input checked="" type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b><br>1.3 | <b>Width</b><br>1.1                                                                                                                                                                                                                                                                      | <b>Depth</b><br>0.50 | <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"/>                            |                      |                                                                                                                                                                                                                                                                                          |                      |                                                                                                                                                                                                                                              |

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

## INTERPRETATION

| Compaction                                                        |                                           | Colour                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                   | Composition                                                   |                                                                                                                                                                                                                                                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|-------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input checked="" type="checkbox"/> loose | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> | <input type="checkbox"/> brownish <input type="checkbox"/> brown<br><input type="checkbox"/> greyish <input type="checkbox"/> grey<br><input type="checkbox"/> orangeish <input type="checkbox"/> orange<br><input type="checkbox"/> yellowish <input type="checkbox"/> yellow<br><input type="checkbox"/> reddish <input type="checkbox"/> red<br><input type="checkbox"/> blueish <input type="checkbox"/> blue | clayey <input type="checkbox"/> <input type="checkbox"/> clay | <input type="checkbox"/> silty <input type="checkbox"/> silt<br><input type="checkbox"/> sandy <input type="checkbox"/> sand<br><input type="checkbox"/> gravelly <input type="checkbox"/> gravel<br><input type="checkbox"/> peaty <input type="checkbox"/> peat |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> moderately compact                       |                                           |                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                               |                                                                                                                                                                                                                                                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> friable                                  |                                           |                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                               |                                                                                                                                                                                                                                                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                           |                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                               |                                                                                                                                                                                                                                                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                           |                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                               |                                                                                                                                                                                                                                                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                           | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                              | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                   |                                                               |                                                                                                                                                                                                                                                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Inclusions                                                        |                                           |                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                               |                                                                                                                                                                                                                                                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                   | chalk                                                                                                                      | iron pan                                                                                                                                                                                                                                                                                                                                                                                                          | manganese                                                     | charcoal                                                                                                                                                                                                                                                          | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |                          |
|                                                                   | frequency                                 |                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                               |                                                                                                                                                                                                                                                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                         | <input type="checkbox"/>                  | <input type="checkbox"/>                                                                                                   | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/>                                      | <input type="checkbox"/>                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <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                                                                                                                       | # 20 | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| L          | L         | 1610659<br>1610660 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D.16228 |      | Date 23/1/18<br>Initials RH<br>Checked by                                                                     |

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

# ADDITIONAL INFORMATION

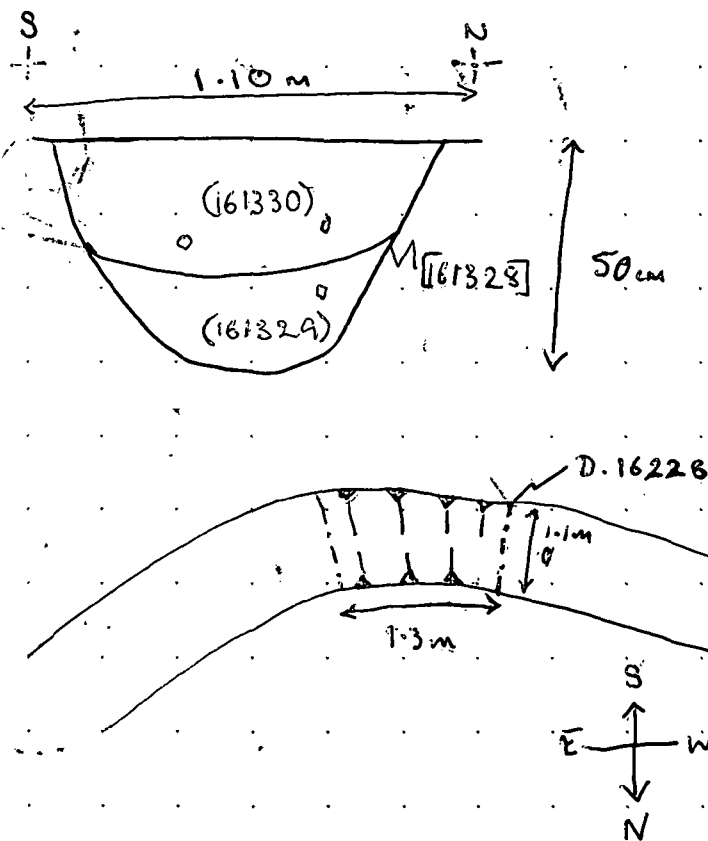
(any further details that may be important for understanding the context, including items marked \* overleaf)

SLOT INTO ENCLOSURE DITCH

Refer to context 161328

## SKETCHES

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



## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 161330 |  |  | Same as context |
|  |  | 161329 |  |  | Cuts context    |
|  |  | 161328 |  |  | Cut by context  |

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

## INTERPRETATION

| Shape                                                                                                                                                                                                                                                                        |  | Orientation                                                                                                                                                                                                                     |  | Sides                                                                                                                                                                                                                                                         |  | Base                                                                                                                                                                                                               |  | Dimensions |  | Shape result of       |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------|--|-----------------------|--|
| 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"/> 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* |  | in metres  |  | (tick all that apply) |  |
|                                                                                                                                                                                                                                                                              |  | <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 checked="" 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"/> silty <input checked="" type="checkbox"/> silt |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> friable                       | brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown                                                           |                          | sandy <input checked="" type="checkbox"/> <input type="checkbox"/> sand | <input type="checkbox"/> gravelly <input type="checkbox"/> gravel       |
|                                                                   |                                                        | greyish <input checked="" type="checkbox"/> <input type="checkbox"/> grey                                                             |                          | peaty <input type="checkbox"/> <input type="checkbox"/> peat            |                                                                         |
|                                                                   |                                                        | orangeish <input checked="" type="checkbox"/> <input type="checkbox"/> orange                                                         |                          |                                                                         |                                                                         |
|                                                                   |                                                        | yellowish <input type="checkbox"/> <input type="checkbox"/> yellow                                                                    |                          |                                                                         |                                                                         |
|                                                                   |                                                        | reddish <input type="checkbox"/> <input type="checkbox"/> red                                                                         |                          |                                                                         |                                                                         |
|                                                                   |                                                        | blueish <input type="checkbox"/> <input type="checkbox"/> blue                                                                        |                          |                                                                         |                                                                         |
| Thickness                                                         |                                                        |                                                                                                                                       |                          |                                                                         |                                                                         |
| 6m                                                                |                                                        | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                         |                          | other* <input type="checkbox"/>                                         |                                                                         |
| Inclusions                                                        |                                                        |                                                                                                                                       |                          |                                                                         |                                                                         |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                                | chalk                                                                                                                                 | iron pan                 | manganese                                                               | charcoal                                                                |
|                                                                   |                                                        |                                                                                                                                       |                          |                                                                         | plant remains*                                                          |
|                                                                   |                                                        |                                                                                                                                       |                          |                                                                         | wood                                                                    |
|                                                                   |                                                        |                                                                                                                                       |                          |                                                                         | marine shell                                                            |
|                                                                   |                                                        |                                                                                                                                       |                          |                                                                         | bone*                                                                   |
|                                                                   |                                                        |                                                                                                                                       |                          |                                                                         | pot                                                                     |
|                                                                   |                                                        |                                                                                                                                       |                          |                                                                         | fired clay / CBM                                                        |
|                                                                   |                                                        |                                                                                                                                       |                          |                                                                         | CTP                                                                     |
|                                                                   |                                                        |                                                                                                                                       |                          |                                                                         | mortar/plaster                                                          |
|                                                                   |                                                        |                                                                                                                                       |                          |                                                                         | leather/textile                                                         |
|                                                                   |                                                        |                                                                                                                                       |                          |                                                                         | glass                                                                   |
|                                                                   |                                                        |                                                                                                                                       |                          |                                                                         | metal                                                                   |
|                                                                   |                                                        |                                                                                                                                       |                          |                                                                         | industrial waste                                                        |
|                                                                   |                                                        |                                                                                                                                       |                          |                                                                         | lithics                                                                 |
|                                                                   |                                                        |                                                                                                                                       |                          |                                                                         | coarse stone                                                            |
| frequency                                                         |                                                        |                                                                                                                                       |                          |                                                                         |                                                                         |
| bulk find                                                         | <input type="checkbox"/>                               | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/> | <input checked="" type="checkbox"/>                                     | <input type="checkbox"/>                                                |

### Basic process

|            |           |                    |                                                                                                                                 |                                                                                                                                |
|------------|-----------|--------------------|---------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos          | Drawing nos # 20                                                                                                                | basic process<br>construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| 2          | 2         | 1610654<br>1610660 | Surveyed: D. 16228<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> | Date 25/1/18<br>Initials RM<br>Checked by                                                                                      |

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

LOWER END OF ENCLOSURE DITCH

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

[illegible]

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (160002) |  |  | Same as context |
|  |  | 161330   |  |  | Cuts context    |
|  |  | 161329   |  |  | Cut by context  |

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

## 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"/> moderately compact | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/>                                                                      |                                                                                                                                                                                                                             | clayey <input type="checkbox"/> silty <input type="checkbox"/> sandy <input checked="" type="checkbox"/> gravelly <input type="checkbox"/> peaty <input type="checkbox"/> | <input type="checkbox"/> clay <input checked="" type="checkbox"/> silt <input type="checkbox"/> sand <input type="checkbox"/> gravel <input type="checkbox"/> peat |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> friable            | brownish <input type="checkbox"/> greyish <input type="checkbox"/> orangeish <input type="checkbox"/> yellowish <input type="checkbox"/> reddish <input type="checkbox"/> blueish <input type="checkbox"/> | <input checked="" type="checkbox"/> brown <input type="checkbox"/> grey <input type="checkbox"/> orange <input type="checkbox"/> yellow <input type="checkbox"/> red <input type="checkbox"/> blue <input type="checkbox"/> |                                                                                                                                                                           |                                                                                                                                                                    |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| Thickness                                                         |                                             |                                                                                                                                                                                                            |                                                                                                                                                                                                                             |                                                                                                                                                                           |                                                                                                                                                                    |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| 0-30                                                              |                                             | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                              |                                                                                                                                                                                                                             | other* <input type="checkbox"/>                                                                                                                                           |                                                                                                                                                                    |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| Inclusions                                                        |                                             |                                                                                                                                                                                                            |                                                                                                                                                                                                                             |                                                                                                                                                                           |                                                                                                                                                                    |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                     | chalk                                                                                                                                                                                                      | iron pan                                                                                                                                                                                                                    | manganese                                                                                                                                                                 | charcoal                                                                                                                                                           | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                             | coarse stone             |                          |
| frequency                                                         |                                             |                                                                                                                                                                                                            |                                                                                                                                                                                                                             |                                                                                                                                                                           |                                                                                                                                                                    |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| bulk find                                                         | <input 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 checked="" 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)

0-30

### CROSS REFERENCE

### Basic process

| Sample nos | Finds nos | Photo nos          | Drawing nos #120                                                                                                                | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|------------|-----------|--------------------|---------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| L          | α         | 1610639<br>1610660 | Surveyed: D 1622.8<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> | Date: 25/1/88<br>Initials: [Signature]<br>Checked by:                                                         |

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

UPPER FILL OF ENCLOSURE DITCH

(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 16</b> | Sub-area/Trench<br><b>TEA 15 - BAY 10</b> | Context number<br><b>(161331)</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context<br><b>C161333</b>          | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (160002) |  |  | Same as context |
|  |  | (160331) |  |  | Cuts context    |
|  |  | (161332) |  |  | Cut by context  |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                    |       |          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------|
| Shape                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                    |       |          |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                    |       |          |
| Orientation                                                                                                                                                                                                                                                                  | Sides                                                                                                                                                                                                                                                         | Base                                                                                                                                                                                                               |       |          |
| <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<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* | <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 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 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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |
| 0.29m                                                                                                                                                            | 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<br><b>α</b> | Finds nos<br><b>X</b> | Photo nos<br><b>1610658</b><br><b>1</b><br><b>1610658</b> | Drawing nos<br><b>#20</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. 16227</b> |
|------------------------|-----------------------|-----------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>1/2/18</b>                                                                                            |
| Initials <b>SW</b>                                                                                            |
| Checked by:                                                                                                   |



# ADDITIONAL INFORMATION

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

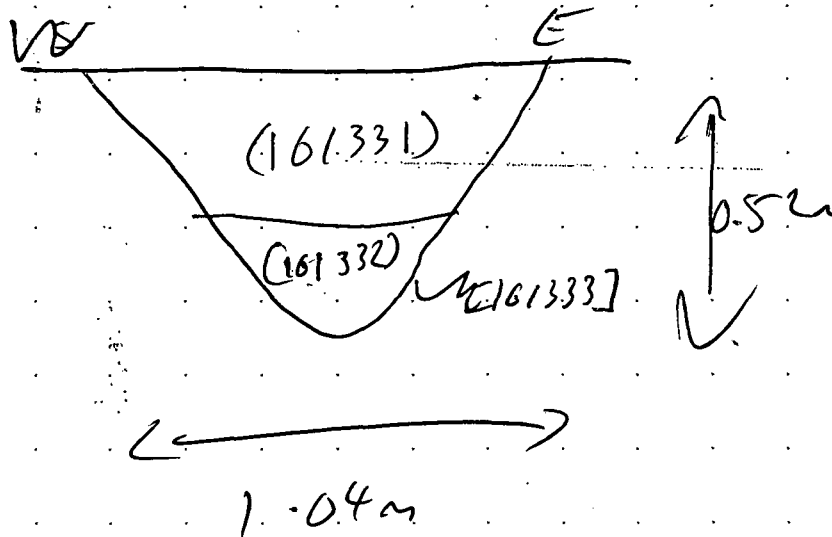
UPPER FILL OF ENCLOSURE DITCH [161333].. STABLE  
SILTING, FILL CONTAINED NO DATEABLE REMAINS, A  
SINGLE PIECE OF T-LOAM RECOVERED MOST LIKELY A WASTE  
PIECE FROM STRIKING.

APPEARS TO HAVE SIFTED UP ON TOP OF INITIAL  
SILTING EVENT (161332), FILL IS SUBSTANTIAL IN COLOR TO  
SUGGEST IT IS NATURAL.

Refer to context

## SKETCHES

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





|                         |                            |                                        |                                                                                                                        |
|-------------------------|----------------------------|----------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub area/trench<br><b>TEA15 - Bann</b> | Context number<br><b>(161332)</b>                                                                                      |
| ECB#                    | Subgroup                   | Parent context<br><b>[161333]</b>      | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161331)</b> |  |  | Same as context |
|  |  | <b>(161332)</b> |  |  | Cuts context    |
|  |  | <b>[161333]</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>} <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>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"/>                                      |                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                               |              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                               |              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

**FILL/DEPOSIT**

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

**DESCRIPTION**

**INTERPRETATION**

|                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                           | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | <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><b>0.23m</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 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>frequency</b><br><b>0</b>                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>bulk find</b>                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |

**CROSS REFERENCE**

|                        |                       |                                                           |                                                                                                                                                               |
|------------------------|-----------------------|-----------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>✓</b> | Finds nos<br><b>α</b> | Photo nos<br><b>1610656</b><br><b>1</b><br><b>1610658</b> | Drawing nos<br><b># 20</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/><br><b>D. 16 227</b> |
|------------------------|-----------------------|-----------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Basic process**

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date<br><b>1/2/18</b>                                                                                         |
| Initials<br><b>JL</b>                                                                                         |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

LOWER FILL OF DITCH [161333], STABLE SLOPE  
FILL CONTAINING NO FANS.

DARK IN COLOR, POSSIBLY ~~FROM~~ FROM WATER WITH  
WAS IN USE, NO LOWER WATER THEN SPLITTING UP  
WITH MATERIAL FROM SLOES AND STABLE ADJACENT AREA.

Refer to context

## SKETCHES

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

(SEE 161331)



|                         |                            |                                         |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15 - BAA14</b> | Context number<br><b>[161333]</b>                                                                                      |
| ECB#                    | Subgroup                   | Parent context<br><b>C161333</b>        | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161332) |  |  | Same as context |
|  |  | [161333] |  |  | Cuts context    |
|  |  | (161003) |  |  | 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 checked="" type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                      | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input checked="" type="checkbox"/> steep<br>I <input type="checkbox"/> moderate sloping<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input checked="" type="checkbox"/> V-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |                              |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br><b>2.00m +</b>                                                                                                                                                                                                                                                                                | <b>Width</b><br><b>1.04m</b>                                                                                                                                                                                                                             | <b>Depth</b><br><b>0.52m</b> | <b>Diameter</b><br><b>-</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                              |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

**FILL/DEPOSIT**

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

**DESCRIPTION**

**INTERPRETATION**

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

**CROSS REFERENCE**

|                        |                       |           |                                                                                                                                                                     |
|------------------------|-----------------------|-----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>α</b> | Finds nos<br><b>α</b> | Photo nos | Drawing nos <b># 20</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>0.16227</b> |
|------------------------|-----------------------|-----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Basic process**

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>1/2/18</b>                                                                                            |
| Initials <b>32</b>                                                                                            |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

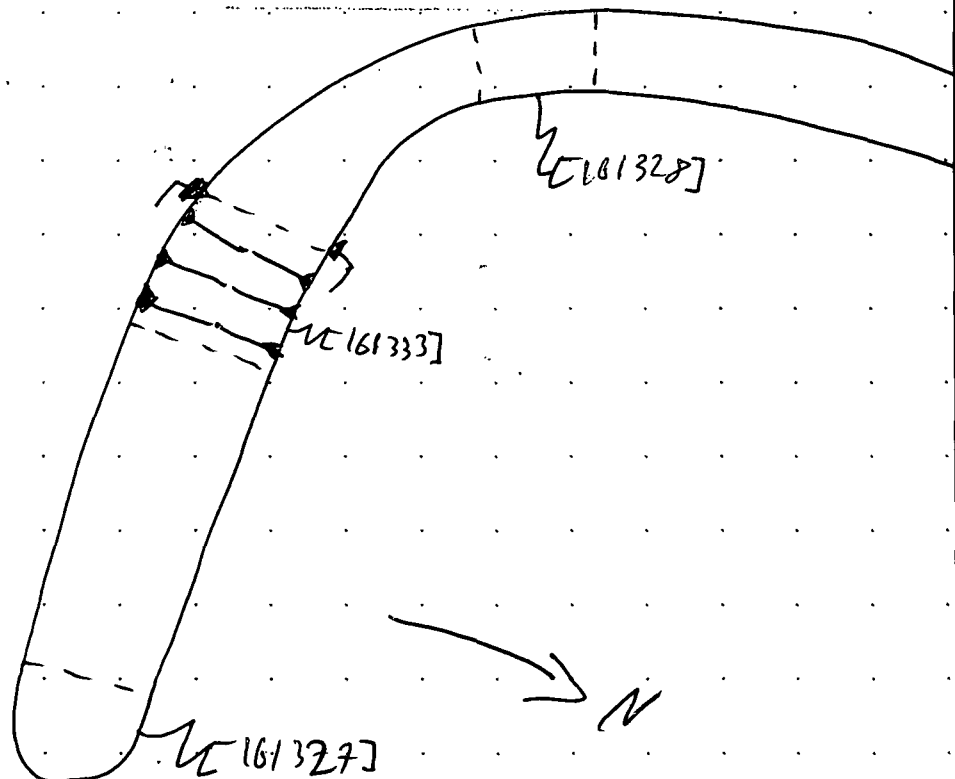
CUT OF. ENCLOSED WITH TWO PHASES OF  
SITING. NO DATEABLE EVIDENCE RECOVERED.

SHARP VSH AFD. PROBLE SIMILAR TO SECTION  
[161328], ~~W~~ RIVER IN THE NORTH.

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 T6A16</b> | Area/field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15-BARROW</b> | Context number<br><b>161334</b>                                                                                        |
| ECB #                         | Subgroup                   | Parent context<br><b>161335</b>        | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                   |        |  |                 |
|--|--|-------------------|--------|--|-----------------|
|  |  | <del>160002</del> | 160002 |  | Same as context |
|  |  | 161334            |        |  | Cuts context    |
|  |  | 161335            |        |  | 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 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<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                                                                                                                                                                                                                                                               | Length                                                                                                                                                                                                                                                                       | Width                                                                                                                                                                                                                             | Depth | Diameter |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <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 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 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 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>0.16m DBP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| stones* <input type="checkbox"/><br>chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/><br>manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/><br>plant remains* <input type="checkbox"/><br>wood <input type="checkbox"/><br>marine shell <input type="checkbox"/><br>bone* <input type="checkbox"/><br>pot <input type="checkbox"/><br>fired clay / CBM <input type="checkbox"/><br>CTP <input type="checkbox"/><br>mortar/plaster <input type="checkbox"/><br>leather/textile <input type="checkbox"/><br>glass <input type="checkbox"/><br>metal <input type="checkbox"/><br>industrial waste <input type="checkbox"/><br>lithics <input type="checkbox"/><br>coarse stone <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency <input type="checkbox"/><br>bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|                        |                       |                                                                            |                                                                                                                                                                          |
|------------------------|-----------------------|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>Q</b> | Finds nos<br><b>X</b> | Photo nos<br><b>DM1</b><br><b>0942</b><br><b>1610661</b><br><b>1610662</b> | Drawing nos <b># 20</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. NO. 16229</b> |
|------------------------|-----------------------|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>25/1/18</b>                                                                                                      |
| Initials <b>ALB</b>                                                                                                      |
| Checked by                                                                                                               |

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

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or printed text on the paper.

[161335]

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

EAST FACING PROFILE

0.16m

MOTTLED BROWNISH ORANGE FIL

[161335]

A diagram of a parabolic arch. The arch is represented by a downward-opening parabola. A vertical double-headed arrow indicates the height from the base to the top of the arch, labeled as 0.16m. A horizontal double-headed arrow indicates the width of the arch at its base, labeled as 16.335. Arrows point from the labels to their respective dimensions.

MOTTLED BROWNISH ORANGE FILM

[161335]



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                               |                            |                                          |                                                                                                                        |
|-------------------------------|----------------------------|------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 TEA16</b> | Area/Field<br><b>TEA16</b> | Sub-area/trench<br><b>TEA15 - BAY 16</b> | Context number<br><b>161335</b>                                                                                        |
| ECB#                          | Subgroup                   | Parent context<br><b>C161335</b>         | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                   |  |  |                 |
|--|--|-------------------|--|--|-----------------|
|  |  | <b>161334</b>     |  |  | Same as context |
|  |  | <b>161335</b>     |  |  | Cuts context    |
|  |  | <b>161335 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 checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |  |  | pit <input type="checkbox"/><br>post-hole <input checked="" type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br><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 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>0.23m E-W</b> <b>0.18m N-S</b> <b>0.16m</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"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| frequency:                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| bulk find                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|                        |                       |                                                                             |                                                                                                                                                                             |
|------------------------|-----------------------|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>X</b> | Finds nos<br><b>X</b> | Photo nos<br><b>0991</b><br><b>0992</b><br><b>1610661</b><br><b>1610662</b> | Drawing nos<br><b># 20</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. NO. 16229</b> |
|------------------------|-----------------------|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>25/1/18</b>                                                                                |
| Initials <b>AKB</b>                                                                                |
| Checked by                                                                                         |

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

# ADDITIONAL INFORMATION

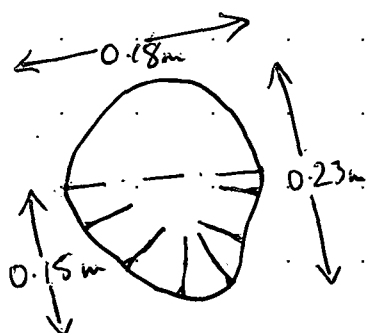
(any further details that may be important for understanding the context, including items marked \* overleaf)

POST HOLE (ISOLATED)

Refer to context (161334)

## SKETCHES

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



## STRATIGRAPHY

|  |  |         |  |  |                 |
|--|--|---------|--|--|-----------------|
|  |  | 16 0002 |  |  | Same as context |
|  |  | 161336  |  |  | Cuts context    |
|  |  | 161337  |  |  | 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><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="margin-left: 10px;">           sloping         </div> </div> |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of:</b> (tick all that apply)<br><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 | <input type="checkbox"/> light <input checked="" type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> | <input type="checkbox"/> brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/> greyish <input type="checkbox"/> grey <input type="checkbox"/> orangeish <input type="checkbox"/> orange <input type="checkbox"/> yellowish <input type="checkbox"/> yellow <input type="checkbox"/> reddish <input type="checkbox"/> red <input type="checkbox"/> bluish <input type="checkbox"/> blue | <input type="checkbox"/> clayey <input type="checkbox"/> clay <input type="checkbox"/> silty <input checked="" type="checkbox"/> silt <input checked="" type="checkbox"/> sandy <input type="checkbox"/> sand <input type="checkbox"/> gravelly <input type="checkbox"/> gravel <input type="checkbox"/> peaty <input type="checkbox"/> peat |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                                        |                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                              | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.46m                                                             |                                                        | <input type="checkbox"/> 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 type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <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. # 20                                                                                                                                            | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| X           | X          | <del>0006</del><br><del>0207</del><br>160675<br>1610676<br>1610775 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><del>1610676</del><br>D. NO. 16230 | Date: 25/1/18<br>Initials: H.B.<br>Checked by:                                                                |

# ADDITIONAL INFORMATION

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

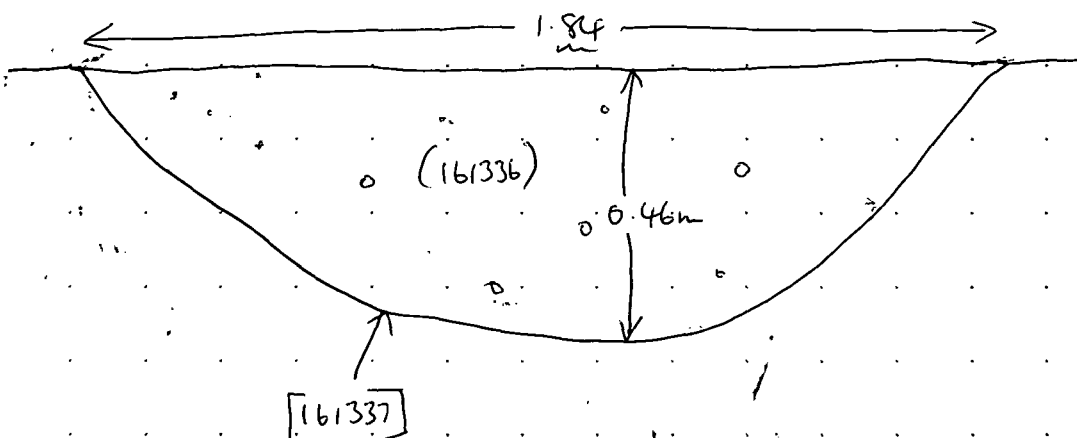
STERILE PIT FILL WITH ONE SMALL FLINT FLAKE (NOT WORKED)

Refer to context

## SKETCHES

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

NORTH FACING



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                                |                             |                                           |                                                                                                                        |
|--------------------------------|-----------------------------|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>AT4 TEA 16</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>TEA 15 - BARROW</b> | Context number<br><b>161337</b>                                                                                        |
| ECB#                           | Subgroup                    | Parent context<br><b>C161337</b>          | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |               |  |                 |
|--|--|---------------|---------------|--|-----------------|
|  |  | <b>161336</b> |               |  | Same as context |
|  |  | <b>161337</b> |               |  | Cuts context    |
|  |  | <b>NAT</b>    | <b>160003</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 checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                              |                              |  | pit <input checked="" type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br>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><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     | <b>Length</b><br><b>1.8m E-W</b>                                                                                                                                                                                                                                                                    | <b>Width</b><br><b>0.50m</b>                                                                                                                                                                                                                 | <b>Depth</b><br><b>0.46m</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"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in-situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| stones* <input type="checkbox"/> 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<br><b>X</b> | Finds nos<br><b>X</b> | Photo nos<br><b>0006</b><br><b>0007</b><br><b>1610675</b><br><b>1610676</b><br><b>1610725</b> | Drawing nos<br><b># 20</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. NO. 16250</b> |
|------------------------|-----------------------|-----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>25/1/18</b>                                                                                           |
| Initials <b>HS</b>                                                                                            |
| Checked by                                                                                                    |

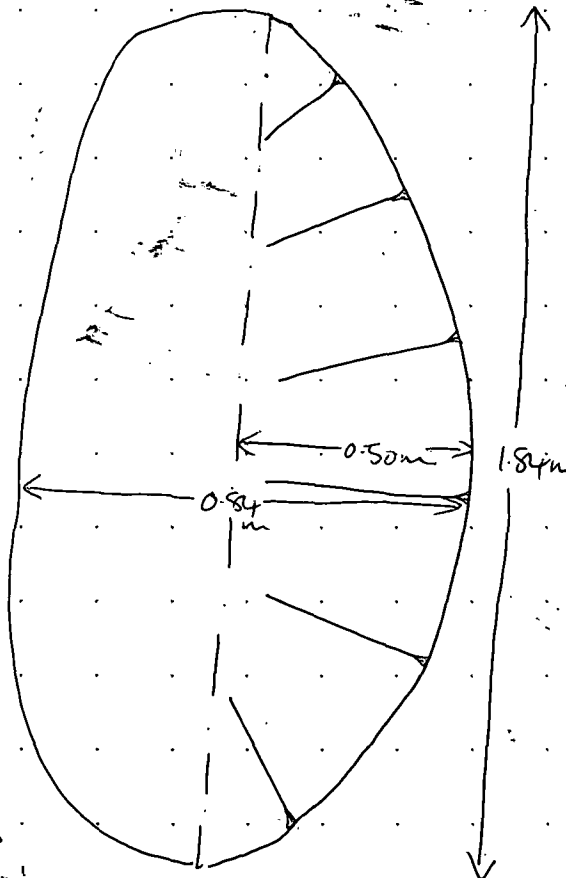
(any further details that may be important for understanding the context, including items marked \* overleaf)

Answered and ok

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins or other markings visible.

## SKETCHES

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





# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                                           |                                                                                                             |
|-------------------------|-----------------------------|-------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| Site code<br><b>AL4</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>TEA 15 TO BARDU</b> | Context number<br><b>161338</b>                                                                             |
| ECB #                   | Subgroup<br><b>---</b>      | Parent context<br><b>---</b>              | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>SUB-SOIL</b> |  |  | Same as context |
|  |  | <b>161338</b>   |  |  | Cuts context    |
|  |  | <b>161339</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>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 type="checkbox"/> dark <input checked="" 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 type="checkbox"/><br>yellowish <input checked="" type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input 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 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>0.33</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><b>M</b>                                                                                                                                                                                                                            | bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|                                                                                                                                           |           |                  |              |
|-------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------------|--------------|
| Sample nos                                                                                                                                | Finds nos | Photo nos        | Drawing nos  |
|                                                                                                                                           |           | <b>1610672-4</b> | <b>11 20</b> |
| Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. 16235</b> |           |                  |              |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>25/1/13</b>                                                                                           |
| Initials <b>RLK</b>                                                                                           |
| Checked by                                                                                                    |

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



# ADDITIONAL INFORMATION

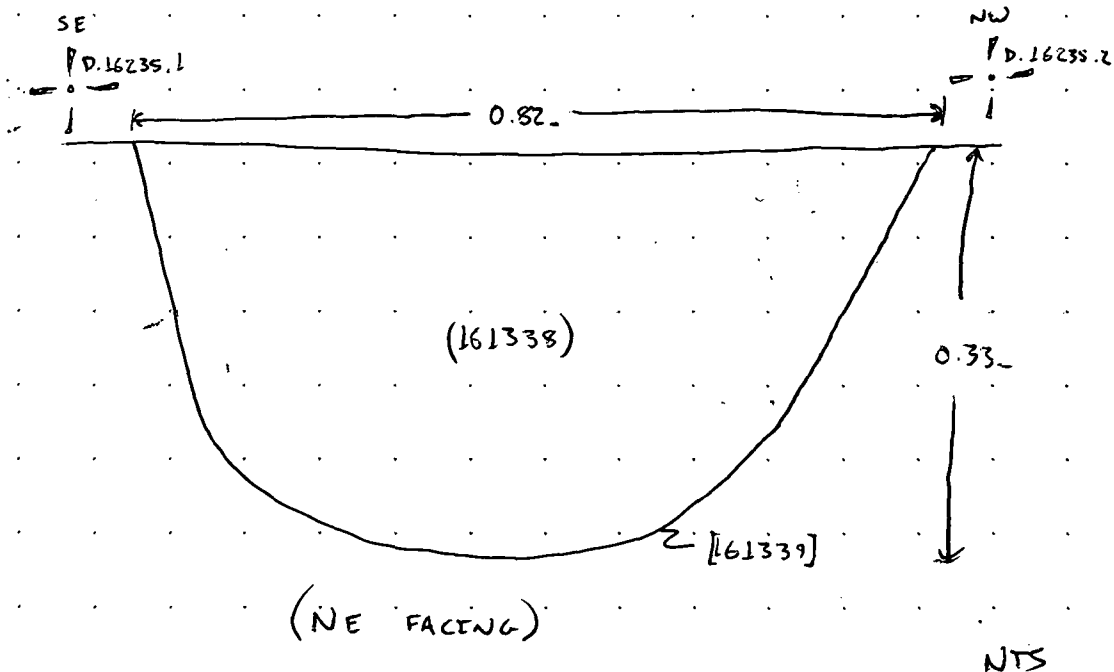
(any further details that may be important for understanding the context, including items marked \* overleaf)

SOLE FILL OF PIT [161339] - INCLUDES MOD GRAVEL AND OCC FLEKS OF CHARCOAL + MANGANESE, ~~LEAF~~ MILD ROOT DISTURBANCE - MANGANESE + CHARCOAL INCREASE IN FREQUENCY CLOSER TO INTERFACE WITH NAT.

Refer to context [161339]

## SKETCHES

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



### STRATIGRAPHY:

|  |  |                    |  |  |                 |     |
|--|--|--------------------|--|--|-----------------|-----|
|  |  | 161338             |  |  | Same as context |     |
|  |  | 161339             |  |  | Cuts context    | NAT |
|  |  | <del>161</del> NAT |  |  | Cut by context  |     |

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

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                    |                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                        |                                                                                                                                                                                                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub: <input checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                        |                                                                                                                                                                                                                                              |
| <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 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*         </div> <div style="margin-left: 10px;">           sloping         </div> </div> |                        | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     | <b>Length</b><br>0.82 - | <b>Width</b><br>0.64 -                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>Depth</b><br>0.33 - | <b>Diameter</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"/>                                                  |                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                        |                                                                                                                                                                                                                                              |

pit ☐

post-hole ☐

stake-hole ☐

ditch ☐

ring-ditch ☐

beam slot ☐

construction cut ☐

robber cut ☐

gully ☐

palaeochannel ☐

furrow ☐

field boundary ☐

burial cut ☐

other cut (describe below) ☐

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

## INTERPRETATION

| <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"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <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"/>   |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <i>Thickness</i>                                                  |                          | black <input type="checkbox"/>     | white <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 # 20                                                                                                                 | construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
|  |  | 1610 6 72-4 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16235 | Date 25/1/18<br>Initials RK<br>Checked by                                                                     |

# ADDITIONAL INFORMATION

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

CUT OF PIT FILLED ONLY BY (161338). PART OF LINE OF DITCHES.

W SIDE E SIDE NOT AS STEEP AS W. SHARP B.O.S TOP, ROUNDED B.O.S

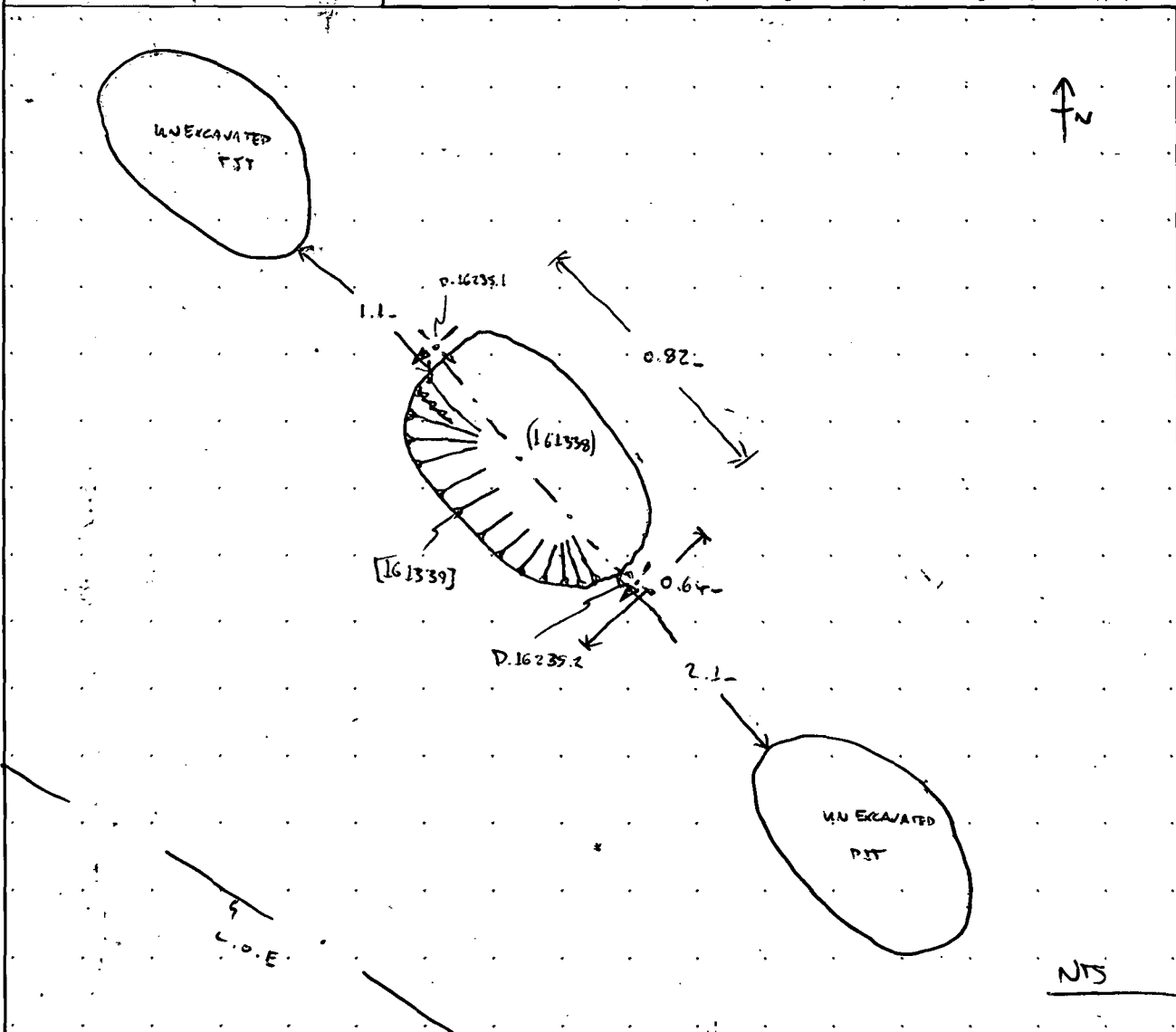
BASE. EXCAVATED ON N SIDE, DRY & SUNNY

SM HALF SECTIONED DAMP

Refer to context 161338

## SKETCHES

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



## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (160002) |  |  | Same as context |
|  |  | 161340   |  |  | Cuts context    |
|  |  | 161341   |  |  | 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 checked="" type="checkbox"/> NE-SW<br><input checked="" 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 checked="" 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"/>                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |

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

## INTERPRETATION

| <i><b>Compaction</b></i>                                                                                                                                         |   |         |       |          |           | <i><b>Colour</b></i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                |      |              |       |     | <i><b>Composition</b></i>                                                                                                                                                                                                                                                                                                                                |     |                |                 |       |       |                  |         |              |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---------|-------|----------|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------|--------------|-------|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------|-----------------|-------|-------|------------------|---------|--------------|--|
| <input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<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 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 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"/> |     |                |                 |       |       |                  |         |              |  |
| <i><b>Thickness</b></i>                                                                                                                                          |   |         |       |          |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                |      |              |       |     |                                                                                                                                                                                                                                                                                                                                                          |     |                |                 |       |       |                  |         |              |  |
| 0.42m                                                                                                                                                            |   |         |       |          |           | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                |      |              |       |     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                          |     |                |                 |       |       |                  |         |              |  |
| <i><b>Inclusions</b></i>                                                                                                                                         |   |         |       |          |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                |      |              |       |     |                                                                                                                                                                                                                                                                                                                                                          |     |                |                 |       |       |                  |         |              |  |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |   | stones* | chalk | iron pan | manganese | charcoal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | plant remains* | wood | marine shell | bone* | pot | fired clay / CBM                                                                                                                                                                                                                                                                                                                                         | CTP | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone |  |
| frequency                                                                                                                                                        | F |         |       |          |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                |      |              |       |     |                                                                                                                                                                                                                                                                                                                                                          |     |                |                 |       |       |                  |         |              |  |
| 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) \_\_\_\_\_

### Basic process

|            |           |              |                                                                                                                                 |                                                                                                                                                               |
|------------|-----------|--------------|---------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos    | Drawing nos                                                                                                                     | construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/><br>Date: 25/1/18<br>Initials: LE<br>Checked by: |
| /          | /         | 0993<br>0994 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>10231 |                                                                                                                                                               |

# ADDITIONAL INFORMATION

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

FILL OF PIT ALIGNMENT [16134] CONTAINING  
FREQUENT SMALL SUB-ANGULAR STONES AND NO  
FINDS.

Refer to context

161340

SKETCHES

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

SEE [16134]

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                             |                                           |                                                                                                                        |
|-------------------------|-----------------------------|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/field<br><b>TEAM 6</b> | Sub-area/trench<br><b>TEAM 6 - BARRON</b> | Context number<br><b>[161341]</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context<br><b>[161341]</b>         | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |   |
|--|--|-----------------|--|--|-----------------|---|
|  |  | <b>161340</b>   |  |  | Same as context | / |
|  |  | <b>161341</b>   |  |  | Cuts context    | / |
|  |  | <b>(160003)</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 checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                          | pit <input checked="" type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |  |  |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input checked="" type="checkbox"/> NW-SE<br>N                                                                                                                                     |  | <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>U <input type="checkbox"/> flat<br>U <input checked="" 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>1.10</b>                                                                                                                                                                                                                                                                           |  | <b>Width</b><br><b>0.35</b>                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |
|                                                                                                                                                                                                                                                                                                                    |  | <b>Depth</b><br><b>0.42</b>                                                                                                                                                                                                                                                                            |  | <b>Diameter</b><br><b>0.62</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"/> |  | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |  | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |  |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| stones* <input type="checkbox"/> 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<br>/ | Finds nos<br>/ | Photo nos<br><b>0993</b><br><b>0994</b> | Drawing nos<br><b>1 20</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>16231</b> |
|-----------------|----------------|-----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>25/1/18</b>                                                                                |
| Initials <b>LE</b>                                                                                 |
| Checked by                                                                                         |

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

# ADDITIONAL INFORMATION

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

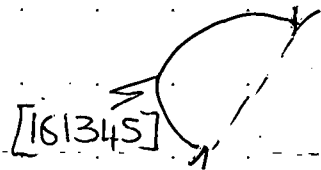
CUT OF PH ALIGNMENT

Refer to context

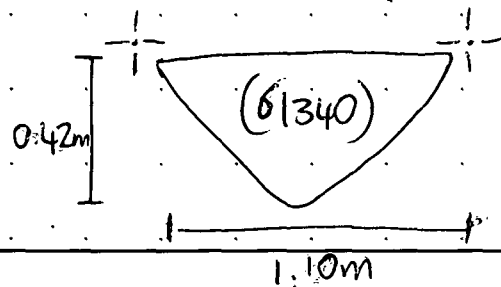
61341

## SKETCHES

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



NE FACING SECTION







**MOLA** **HEADLAND**  
ARCHAEOLOGY

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEAM 6     | TEA15-BARROW    | 161342                                                                                                 |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [161343]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 160002 |  |  | Same as context |
|  |  | 161342 |  |  | Cuts context    |
|  |  | 161343 |  |  | 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:</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)

# INTERPRETATION

[illegible]

### Basic process

| Sample nos | Findings nos | Photo nos                                | Drawing nos                                                                                                 | # 20      | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
|------------|--------------|------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------|----------------------------------------------------------------------------------------------------|
| X          | X            | 61 0995<br>61 0996<br>61 0665<br>61 0666 | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | D 16 2.3A | Date 25/1/18<br>Initials SBT<br>Checked by                                                         |

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

# ADDITIONAL INFORMATION

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

TRSH 6044/MLOW

~~POSTHOLE~~ FILL GENERAL SCATTER OF A MODERATE AMOUNT OF  
SUB ANG - ANGULAR FLINTS 10-30mm FROM MID POINT TO  
TOP OF FILL. TWO MODERATELY SIZED FLINTS 100mm & APPROX  
IN BASE OF FILL.

Refer to context

See [61343]

## 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>TEA16</b> | Sub-area/Trench<br><b>TEA15-BARCOB</b> | Context number<br><b>161343</b>                                                                                        |
| ECB#                    | Subgroup                   | Parent context<br><b>[161343]</b>      | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161342</b> |  |  | Same as context |
|  |  | <b>161343</b> |  |  | Cuts context    |
|  |  | <b>160003</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 checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                              | pit <input 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 checked="" type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input checked="" type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |  | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     |  | <b>Length</b><br><b>1.12m</b>                                                                                                                                                                                                                                                                               |  | <b>Width</b><br><b>1.10m</b>                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |
|                                                                                                                                                                                                                                                                                                                    |  | <b>Depth</b><br><b>0.44m</b>                                                                                                                                                                                                                                                                                |  | <b>Diameter</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"/> |           | <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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                                                                                                                                                                                                                                                                                                                                                          |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |         |              |          |           |                  |                |                |                 |       |       |                  |         |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <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> </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 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                                                                                                                                                                                                                                                                                                                                                          |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |         |              |          |           |                  |                |                |                 |       |       |                  |         |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

### CROSS REFERENCE

|                        |                       |                                               |                                                                                                                                                                        |
|------------------------|-----------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>2</b> | Finds nos<br><b>2</b> | Photo nos<br><b>1610995</b><br><b>1610996</b> | Drawing nos<br><b># 20</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D 16234</b> |
|------------------------|-----------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                            |                |
|----------------------------------------------------------------------------------------------------------------------------|----------------|
| <b>Basic process</b><br>construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |                |
| Date                                                                                                                       | <b>25/1/18</b> |
| Initials                                                                                                                   | <b>SBT</b>     |
| Checked by                                                                                                                 |                |

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

160002

# ADDITIONAL INFORMATION

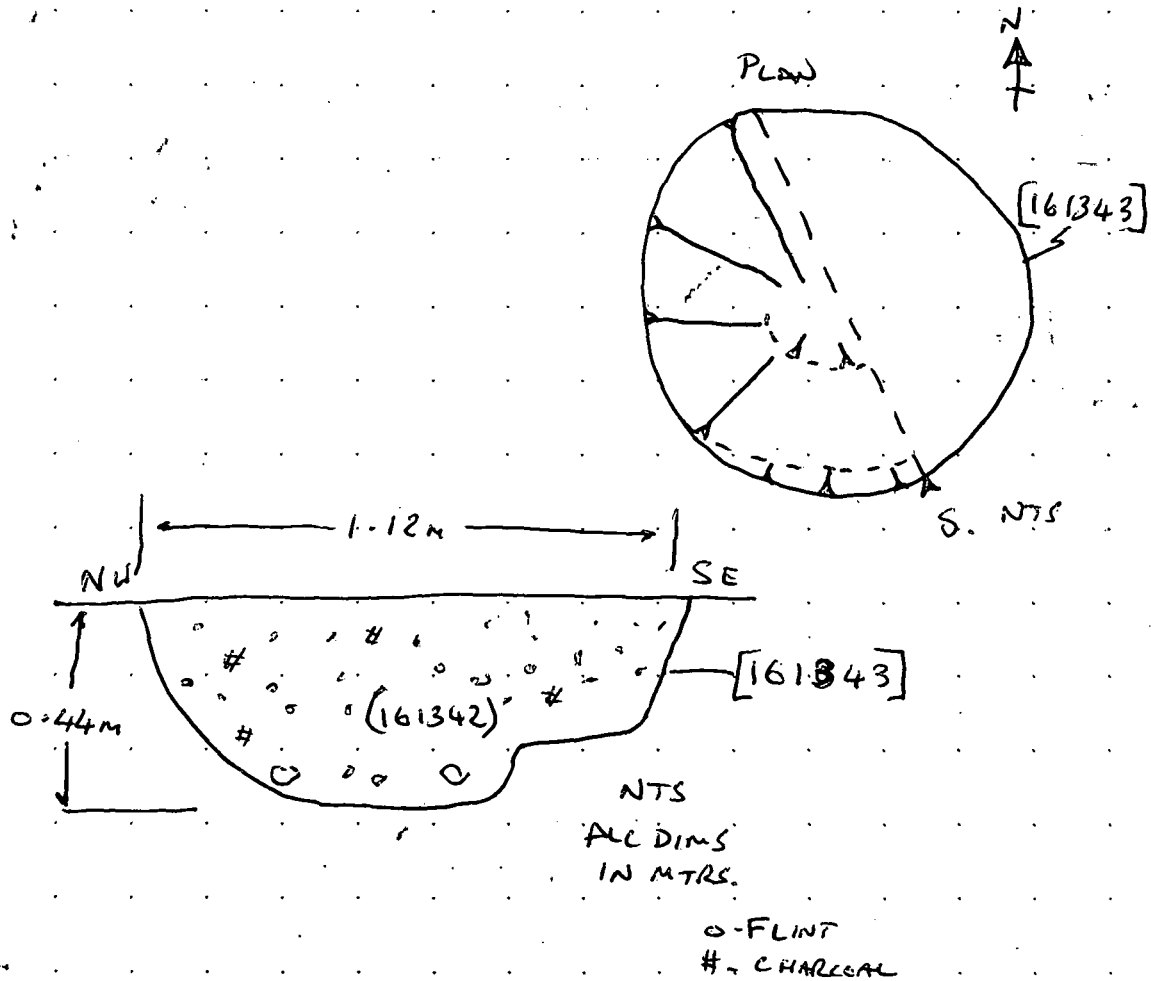
(any further details that may be important for understanding the context, including items marked \* overleaf)

1 TREE THROW/BOLE

## 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>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15 - BARON</b> | Context number<br><b>(161344)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>[161345]</b>       | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(160002)</b> |  |  | Same as context |
|  |  | <b>(161344)</b> |  |  | Cuts context    |
|  |  | <b>[161345]</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<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 type="checkbox"/> moderately compact<br><input checked="" type="checkbox"/> loose<br><input type="checkbox"/> friable                                                            | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> <input type="checkbox"/> clay<br>silty <input type="checkbox"/> <input checked="" type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat | <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><b>0.27m</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 <input checked="" type="checkbox"/><br>bulk find <input type="checkbox"/>                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |

## CROSS REFERENCE

|                         |                        |                                                |                                                                                                                                                                     |
|-------------------------|------------------------|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos.<br><b>α</b> | Finds nos.<br><b>α</b> | Photo nos.<br><b>1610740</b><br><b>1610741</b> | Drawing nos. <b>#23</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>0.16232</b> |
|-------------------------|------------------------|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☐ disuse ☒

|            |               |
|------------|---------------|
| Date       | <b>1/2/18</b> |
| Initials   | <b>JW</b>     |
| Checked by |               |

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

# ADDITIONAL INFORMATION

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

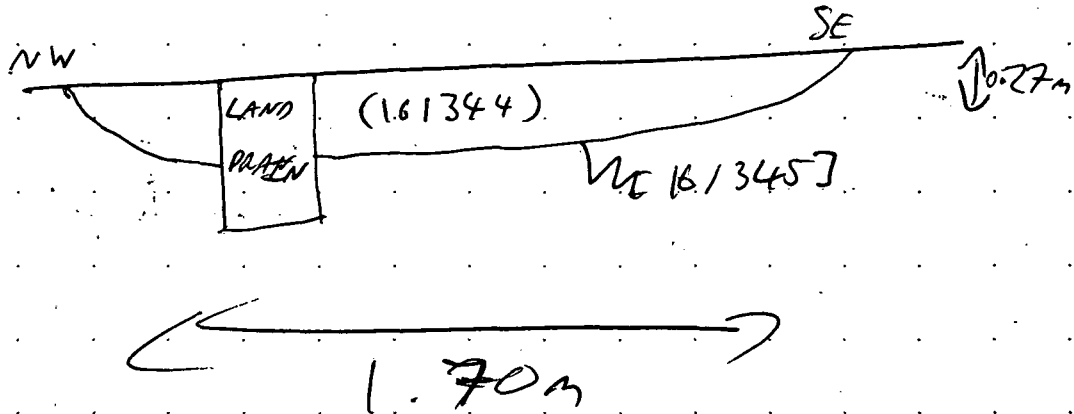
SINGULAR STRONG FILL OF PIT [161345].  
CONTAINED NO FOSILS, ~~AND~~ HOMOGENEOUS FILL.

TERMINATED BY MODERN LAND GRAIN ON NW SIDE

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 16</b> | Sub-area/trench<br><b>TEA 5 - BARROW</b> | Context number<br><b>E161345</b>                                                                                       |
| ECB #                   | Subgroup                    | Parent context<br><b>E161345</b>         | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161344)</b> |  |  | Same as context |
|  |  | <b>E161345</b>  |  |  | Cuts context    |
|  |  | <b>(160003)</b> |  |  | Cut by context  |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                               |              |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|
| <b>Shape</b>                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                               |              |                 |
| 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"/> |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                               |              |                 |
| <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 checked="" type="checkbox"/> NW-SE<br><br><input checked="" type="checkbox"/> N                                                                                                | <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 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* |              |                 |
| <b>Dimensions</b>                                                                                                                                                                                                                                                                                  | <b>Length</b>                                                                                                                                                                                                                                                                    | <b>Width</b>                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |
| in metres                                                                                                                                                                                                                                                                                          | <b>1.70</b>                                                                                                                                                                                                                                                                      | <b>1.70m</b>                                                                                                                                                                                                                  | <b>0.27m</b> | <b>-</b>        |
| <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 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) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <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<br><b>1610740</b><br><b>1610741</b> | Finds nos<br><b>X</b> | Photo nos<br><b>1610740</b><br><b>1610741</b> | Drawing nos<br><b>#23</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/><br><b>D 16232</b> |
|------------------------------------------------|-----------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------|
| <b>Basic process</b><br>construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>1/2/18</b>                                                                                                                    |
| Initials <b>JW</b>                                                                                                                    |
| Checked by                                                                                                                            |

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



# ADDITIONAL INFORMATION

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

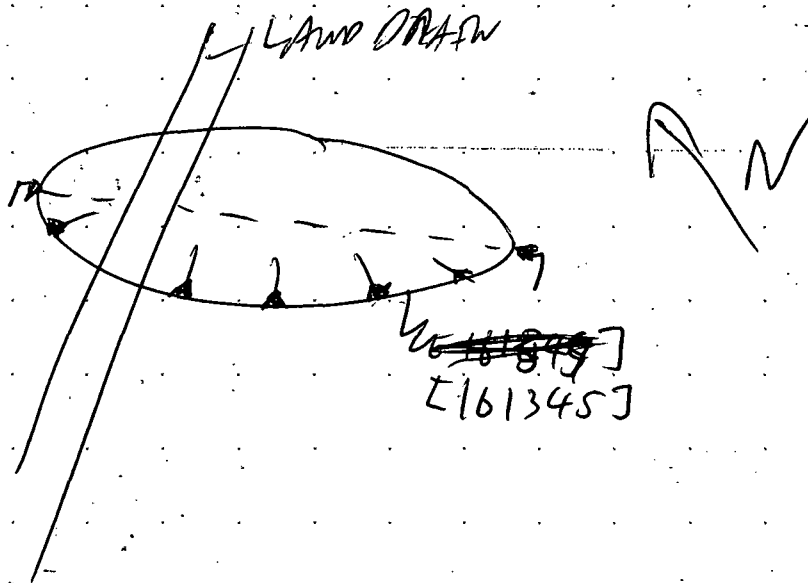
CUT OF SHALE UNIT, BELIEVED TO BE PART  
OF PREHEATED PIT ALIGNMENT.

HOWEVER VERY SHALLOW WITH NO PATRONS EVIDENCE.

Refer to context

## SKETCHES

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



## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (+)      |  |  | Same as context |
|  |  | (161346) |  |  | Cuts context    |
|  |  | (161347) |  |  | Cut by context  |

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

DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                             |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                |                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Shape<br>sub- <input checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                |                                                                                                                                                                                                                                       | pit <input checked="" type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam-slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="text"/> |  |
| Orientation<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                                                               |                 | 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: 2em; margin-right: 10px;">}</div> <div>           sloping         </div> </div> |                | Base<br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input checked="" type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| Dimensions<br>in metres                                                                                                                                                                                                                                                                                     | Length<br>1.26m | Width<br>0.49m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Depth<br>0.08m | Diameter<br>0.88m                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| 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"/>                                                  |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                |                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |

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

### DESCRIPTION

## INTERPRETATION

| Compaction                                                        |                                             | Colour                                                                                                                                |                          | Composition                                                             |                                     |
|-------------------------------------------------------------------|---------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------------------------------------|-------------------------------------|
| <input type="checkbox"/> compact                                  | <input 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 type="checkbox"/> clay       |
| <input type="checkbox"/> loose                                    | <input checked="" type="checkbox"/> friable | brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown                                                           |                          | silty <input type="checkbox"/> <input checked="" type="checkbox"/> silt | <input type="checkbox"/> sand       |
|                                                                   |                                             | greyish <input type="checkbox"/> <input type="checkbox"/> grey                                                                        |                          | sandy <input checked="" type="checkbox"/>                               | <input type="checkbox"/> gravel     |
|                                                                   |                                             | orangeish <input type="checkbox"/> <input type="checkbox"/> orange                                                                    |                          | gravelly <input type="checkbox"/>                                       | <input type="checkbox"/> peat       |
|                                                                   |                                             | yellowish <input type="checkbox"/> <input type="checkbox"/> yellow                                                                    |                          | peaty <input type="checkbox"/>                                          |                                     |
|                                                                   |                                             | reddish <input checked="" type="checkbox"/> <input type="checkbox"/> red                                                              |                          |                                                                         |                                     |
|                                                                   |                                             | blueish <input type="checkbox"/> <input type="checkbox"/> blue                                                                        |                          |                                                                         |                                     |
| Thickness                                                         |                                             |                                                                                                                                       |                          |                                                                         |                                     |
| 0 - 0.3m                                                          |                                             | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                         |                          | other* <input type="checkbox"/>                                         |                                     |
| Inclusions                                                        |                                             |                                                                                                                                       |                          |                                                                         |                                     |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                     | chalk                                                                                                                                 | iron pan                 | manganese                                                               | charcoal                            |
|                                                                   |                                             |                                                                                                                                       |                          |                                                                         | plant remains*                      |
|                                                                   |                                             |                                                                                                                                       |                          |                                                                         | wood                                |
|                                                                   |                                             |                                                                                                                                       |                          |                                                                         | marine shell                        |
|                                                                   |                                             |                                                                                                                                       |                          |                                                                         | bone*                               |
|                                                                   |                                             |                                                                                                                                       |                          |                                                                         | pot                                 |
|                                                                   |                                             |                                                                                                                                       |                          |                                                                         | fired clay / CBM                    |
|                                                                   |                                             |                                                                                                                                       |                          |                                                                         | CTP                                 |
|                                                                   |                                             |                                                                                                                                       |                          |                                                                         | mortar/plaster*                     |
|                                                                   |                                             |                                                                                                                                       |                          |                                                                         | leather/textile                     |
|                                                                   |                                             |                                                                                                                                       |                          |                                                                         | glass                               |
|                                                                   |                                             |                                                                                                                                       |                          |                                                                         | metal                               |
|                                                                   |                                             |                                                                                                                                       |                          |                                                                         | industrial waste                    |
|                                                                   |                                             |                                                                                                                                       |                          |                                                                         | lithics                             |
|                                                                   |                                             |                                                                                                                                       |                          |                                                                         | coarse stone                        |
| frequency                                                         |                                             |                                                                                                                                       |                          |                                                                         |                                     |
| bulk find                                                         | <input type="checkbox"/>                    | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/>                                                | <input checked="" type="checkbox"/> |

### CROSS REFERENCE

| Sample nos | Finds nos | Photo nos                        | Drawing nos                                                                                                                                |
|------------|-----------|----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| /          | /         | 100-0999<br>101-0001<br>101-0002 | H 23<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D-16 233 |

### Basic process

construction ☐ use ☐ disuse ☐

Date 26.1.18

Initials KK

Checked by

# ADDITIONAL INFORMATION

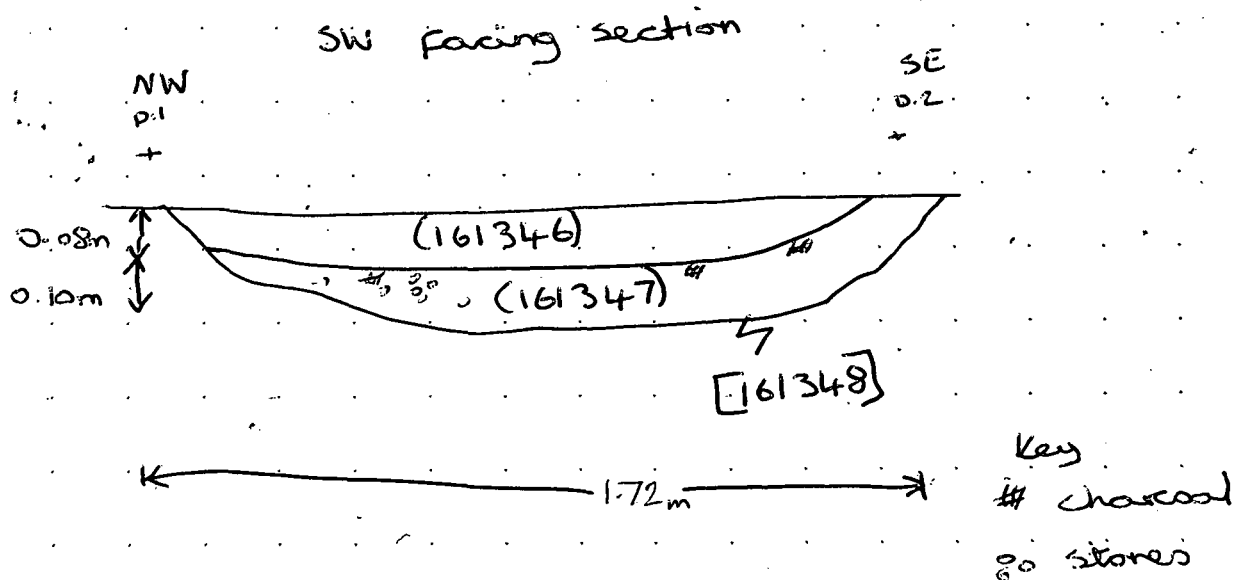
(any further details that may be important for understanding the context, including items marked \* overleaf)

one of pits relating to pit/posthole alignment.  
 irregular base and cut.  
 oblong in shape.  
 Fill contained no finds.

Refer to context (161346)

## SKETCHES

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



## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161346) |  |  | Same as context |
|  |  | (161347) |  |  | Cuts context    |
|  |  | [161348] |  |  | Cut by context  |

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

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                          |       |                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Shape                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                          |       |                                                                                                                                                                                                                               | 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"/> |  |
| 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                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
|  <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input checked="" type="checkbox"/> NW-SE                                                                     |  | <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* |       | <input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input checked="" type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| Dimensions                                                                                                                                                                                                                                                                                         |  | Length                                                                                                                                                                                                                                                                   | Width | Depth                                                                                                                                                                                                                         | Diameter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |
| in metres                                                                                                                                                                                                                                                                                          |  | 1.72m                                                                                                                                                                                                                                                                    | 0.49m | 0.10m                                                                                                                                                                                                                         | 0.88m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                          |       |                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                  |  |                                                                                                                                                                                                                                                                          |       |                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |

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

## INTERPRETATION

| Compaction                                                        |                                             | Colour                                                                                                                                                                                                                |                                                                                                                                                                                                    | Composition                                                                                                                                                                          |                                                                                                                                                                    |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input 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"/> silty <input checked="" type="checkbox"/> sandy <input checked="" type="checkbox"/> gravelly <input type="checkbox"/> peaty <input type="checkbox"/> | <input type="checkbox"/> clay <input checked="" type="checkbox"/> silt <input type="checkbox"/> sand <input type="checkbox"/> gravel <input type="checkbox"/> peat |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    | <input checked="" type="checkbox"/> friable | brownish <input type="checkbox"/> greyish <input type="checkbox"/> orangeish <input checked="" type="checkbox"/> yellowish <input type="checkbox"/> reddish <input type="checkbox"/> blueish <input type="checkbox"/> | <input checked="" type="checkbox"/> brown <input type="checkbox"/> grey <input type="checkbox"/> orange <input type="checkbox"/> yellow <input type="checkbox"/> red <input type="checkbox"/> blue |                                                                                                                                                                                      |                                                                                                                                                                    |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                             |                                                                                                                                                                                                                       |                                                                                                                                                                                                    | other* <input type="checkbox"/>                                                                                                                                                      |                                                                                                                                                                    |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.1m                                                              |                                             | 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 checked="" type="checkbox"/>         | <input type="checkbox"/>                                                                                                                                                                                              | <input type="checkbox"/>                                                                                                                                                                           | <input type="checkbox"/>                                                                                                                                                             | <input checked="" type="checkbox"/>                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <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) ☐

other\* ☐

### Basic process

|            |              |                                  |                                                                                                                                    |                                                                                                    |
|------------|--------------|----------------------------------|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| Sample nos | Findings nos | Photo nos                        | Drawing nos #23                                                                                                                    | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| /          | /            | 100-0999<br>101-0001<br>101-0002 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D. 16233 | Date: 26-1-18<br>Initials: KK<br>Checked by:                                                       |

# ADDITIONAL INFORMATION

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

~~Second~~

Primary fill of pit,  
related to pit alignment  
contained no finds  
however fill did contain  
frequent charcoal (not in situ burning)  
and small sub angled stones  
in top of fill.

Refer to context (161347)

## SKETCHES

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

Please see sketch of  
section on sheet  
(161346)

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                            |                                                                                                                        |
|-------------------------|----------------------------|--------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub area/Trench<br><b>TEA16 (W) BARROW</b> | Context number<br><b>[161348]</b>                                                                                      |
| ECB#                    | Subgroup                   | Parent context<br><b>[161348]</b>          | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161347)</b> |  |  | Same as context |
|  |  | <b>[161348]</b> |  |  | Cuts context    |
|  |  | <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 checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                          | pit <input checked="" type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |  |  |  |  |  |
| <b>Orientation</b><br>I <input 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 checked="" type="checkbox"/> moderate sloping<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* |  | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input checked="" type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |  |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     |  | <b>Length</b> <b>1.66</b>                                                                                                                                                                                                                                                                                      |  | <b>Width</b> <b>1.18m</b>                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |  |
| <b>Depth</b> <b>0.18m</b>                                                                                                                                                                                                                                                                                          |  | <b>Diameter</b> <b>—</b>                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |  |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                  |  |                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |  |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input checked="" 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |  |
| 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 | Photos nos        | Drawing nos <b>#23</b>                                                                                    |
|            |           | <b>100 - 0999</b> | Surveyed:                                                                                                 |
|            |           | <b>101 - 0001</b> | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|            |           | <b>101 - 0002</b> | <b>D. 16233</b>                                                                                           |

## Basic process

construction ☐ use ☐ disuse ☒

Date **KK**

Initials **26-1-18**

Checked by

# ADDITIONAL INFORMATION

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

cut of irregular  
shape pit in pit alignment  
contained two fills  
none contained for finds

Refer to context

[161348]

## SKETCHES

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

D. 16233.1



D. 16233.2

[161348]



[161343]

N.T.S



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                        |                                                                                                                        |
|-------------------------|----------------------------|----------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15-DARREN</b> | Context number<br><b>161349</b>                                                                                        |
| ECB#                    | Subgroup                   | Parent context<br><b>161349</b>        | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161330</b> |  |  | Same as context |
|  |  | <b>161349</b> |  |  | Cuts context    |
|  |  | <b>160003</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 type="checkbox"/> NE-SW<br>I <input checked="" type="checkbox"/> NW-SE<br>N<br>(N)                                                                                                                   | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input checked="" type="checkbox"/> steep<br>L <input type="checkbox"/> moderate sloping<br>L <input type="checkbox"/> gentle<br>L <input type="checkbox"/> stepped<br>L <input type="checkbox"/> undercutting<br>L <input type="checkbox"/> complex* | <b>Base</b><br>- <input type="checkbox"/> flat<br>- <input checked="" type="checkbox"/> concave<br>- <input type="checkbox"/> v-shaped<br>- <input type="checkbox"/> sloping<br>- <input type="checkbox"/> uneven<br>- <input type="checkbox"/> complex* |                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br><b>2m slot</b>                                                                                                                                                                                                                                                                                | <b>Width</b><br><b>0.78m</b>                                                                                                                                                                                                                             | <b>Depth</b><br><b>0.45m</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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|            |           |                                          |                                                                                                                                          |
|------------|-----------|------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                | Drawing nos                                                                                                                              |
|            |           | 1610678<br>1610679<br>1610680<br>1610681 | # 2-2<br>Surveyed: D. 16236<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>26.1.2018</b>                                                                              |
| Initials <b>RH</b>                                                                                 |
| Checked by                                                                                         |

# ADDITIONAL INFORMATION

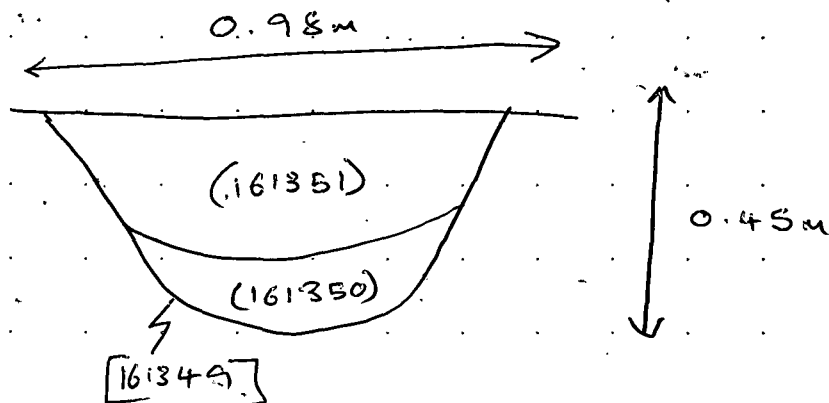
(any further details that may be important for understanding the context, including items marked \* overleaf)

SLOT OF ENCLOSURE DITCH TWO FILLS.  
NO FINDS.

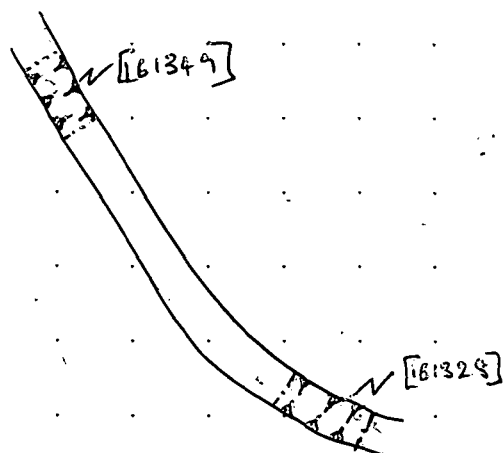
Refer to context

## SKETCHES

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



N  
▲



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                               |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>T&amp;A15-B&amp;A16</b> | Context number<br><b>161350</b>                                                                                        |
| ECB#                    | Subgroup                   | Parent context<br><b>161349</b>               | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161351</b> |  |  | Same as context |
|  |  | <b>161350</b> |  |  | Cuts context    |
|  |  | <b>161349</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 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 type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/>                                                                                                                                                                 | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input checked="" type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | <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>                                                                                                                                                                      | 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 checked="" 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 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

|                        |                       |                                                                                   |                                                                                                                                                                  |
|------------------------|-----------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>α</b> | Finds nos<br><b>α</b> | Photo nos<br><b>1610678</b><br><b>1610679</b><br><b>1610680</b><br><b>1610681</b> | Drawing nos<br><b>#20</b><br>Surveyed: <b>16236</b><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|------------------------|-----------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date: <b>26/1/98</b>                                                                                          |
| Initials: <b>EM</b>                                                                                           |
| Checked by:                                                                                                   |

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

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

[illegible]

161349

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



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

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA16      | TEA15 - Backhoe | 161351                                                                                                 |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | 01613497        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (160002) |  |  | Same as context |
|  |  | 161351   |  |  | Cuts context    |
|  |  | 161350   |  |  | Cut by context  |

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

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                    |               | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="font-size: 2em; margin-right: 10px;">}</div> <div>sloping</div> </div> |              |                 |
|                                                                                                                                                                                                                                                                                              |               | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex*                                                                                                                                                                                                                                               |              |                 |
| <b>Dimensions</b>                                                                                                                                                                                                                                                                            | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Depth</b> | <b>Diameter</b> |
| 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"/>                                       |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                 |

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

## INTERPRETATION

| Compaction                                                        |                                             | Colour                                                                                                                                           |                          | Composition                       |                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|---------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-----------------------------------|------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input type="checkbox"/> moderately compact | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input checked="" type="checkbox"/> |                          | clayey <input type="checkbox"/>   | <input type="checkbox"/> clay            |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> friable            | brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown                                                                      |                          | silty <input type="checkbox"/>    | <input checked="" type="checkbox"/> silt |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | greyish <input type="checkbox"/> <input type="checkbox"/> grey                                                                                   |                          | sandy <input type="checkbox"/>    | <input type="checkbox"/> sand            |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | orangeish <input type="checkbox"/> <input type="checkbox"/> orange                                                                               |                          | gravelly <input type="checkbox"/> | <input type="checkbox"/> gravel          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | yellowish <input type="checkbox"/> <input type="checkbox"/> yellow                                                                               |                          | peaty <input type="checkbox"/>    | <input type="checkbox"/> peat            |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | reddish <input type="checkbox"/> <input type="checkbox"/> red                                                                                    |                          |                                   |                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | blueish <input type="checkbox"/> <input type="checkbox"/> blue                                                                                   |                          |                                   |                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                             | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                    |                          | other* <input type="checkbox"/>   |                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Inclusions                                                        |                                             |                                                                                                                                                  |                          |                                   |                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                     | chalk                                                                                                                                            | iron pan                 | manganese                         | charcoal                                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |                          |                          |
| frequency                                                         |                                             |                                                                                                                                                  |                          |                                   |                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                         | <input 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"/> | <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 #20                                                                                                                | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| L          | X         | 1610678<br>1610679<br>1610680<br>1610681 | Surveyed: D.16236<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> | Date: 26/1/18<br>Initials: R.H.<br>Checked by:                                                     |

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

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

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

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or printed text on the paper.

## 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 TBA16</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15-BACK ON</b> | Context number<br><b>161352</b>                                                                                        |
| ECB #                         | Subgroup                   | Parent context<br><b>[161354]</b>       | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>160002</b> |  |  | Same as context |
|  |  | <b>161352</b> |  |  | Cuts context    |
|  |  | <b>161353</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>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 type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input checked="" type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/>                                                                                                                                                                                                                                                                                                        | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input 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>0.15 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>0</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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |

## CROSS REFERENCE

|                        |                       |                                                                                               |                                                                                                                                                                             |
|------------------------|-----------------------|-----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>L</b> | Finds nos<br><b>Q</b> | Photo nos<br><b>1610679</b><br><b>0012</b><br><b>0013</b><br><b>1610682</b><br><b>1610683</b> | Drawing nos<br><b># 20</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. NO. 16238</b> |
|------------------------|-----------------------|-----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>26/1/18</b>                                                                                           |
| Initials <b>ALB</b>                                                                                           |
| Checked by                                                                                                    |

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



# ADDITIONAL INFORMATION

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

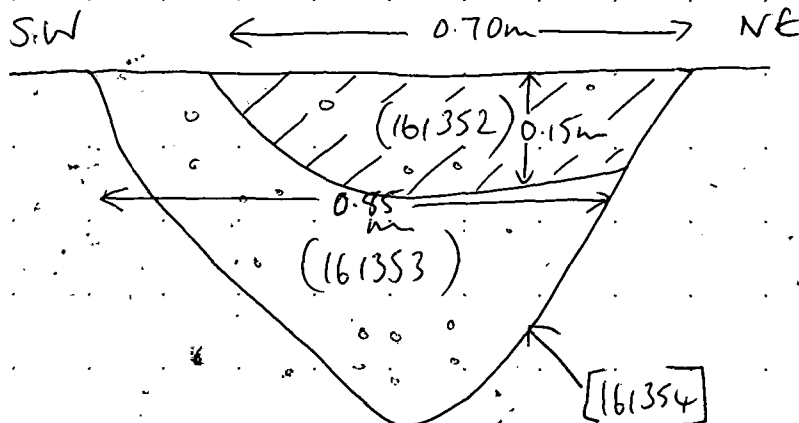
MODERATELY COMPACTED LIGHT BROWN SANDY SILT WITH  
OCC. INCLUSIONS OF SMALL ROUNDED AND ANGULAR PEBBLES  
AND OLD ROOT FRAGS. ONE FRAG. OF POT PRESENT. MAX  
DEPTH 0.15m MAY POSSIBLY REPRESENT FINAL BACKFILLING  
OF DITCH?

Refer to context [161354]

## SKETCHES

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

SOUTH EAST FACING PROFILE.



|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14 T6A16 | FEA16      | BA15-BARREN     | 161353                                                                                                 |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | F161354J        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 161352 |  |  | Same as context |
|  |  | 161353 |  |  | Cuts context    |
|  |  | 161354 |  |  | Cut by context  |

**CUT**

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Shape                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                    | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |  |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| Orientation                                                                                                                                                                                                                                                                  |  | Sides                                                                                                                                                                                                                                                         |       | Base                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><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* |       | <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 type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown<br>greyish <input type="checkbox"/> <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> <input type="checkbox"/> red<br>blueish <input type="checkbox"/> <input type="checkbox"/> blue | clayey <input type="checkbox"/> <input type="checkbox"/> clay<br>silty <input type="checkbox"/> <input checked="" type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat |                                 |             |          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |  |  |
| Thickness                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                          |                                 |             |          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |  |  |
| 0.30m                                                                                                                                                            | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                          |                                 |             |          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |  |  |
| 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 | Findings nos | Photo nos                                                         | Drawing nos                                                                                                                                    |
|------------|--------------|-------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| ✓          | 2            | 610 719<br><del>DOE</del><br><del>DOE</del><br>1610682<br>1610683 | # 20<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D. NO. 16238 |

### Basic process

|              |         |        |
|--------------|---------|--------|
| construction | use     | disuse |
| Date         | 26/1/18 |        |
| Initials     | HRS     |        |
| Checked by   |         |        |

# ADDITIONAL INFORMATION

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

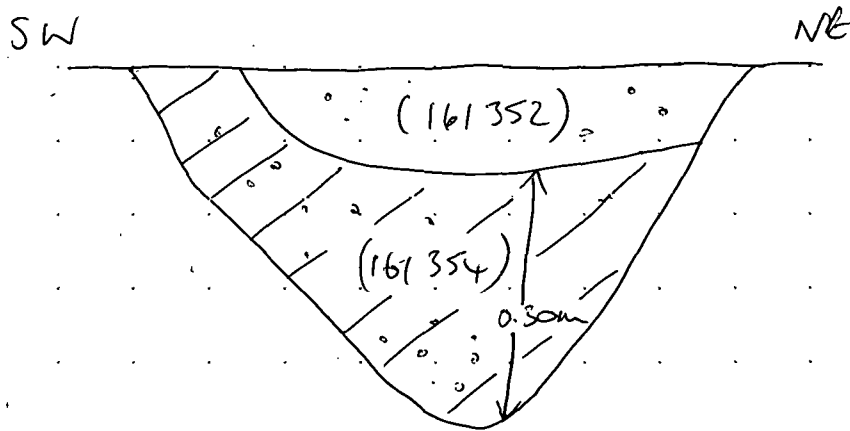
MODERATELY COMPACTED DARK BROWN SANDY SILT. WITH  
OCE. INCLUSIONS OF SMALL ROUNDED AND ANGULAR PEBBLES  
AND OCE. ROOT FRAGS. APPROX. 0.30m DEEP MAX.  
POSSIBLY REPRESENTS THE PROCESS OF NATURAL INFILLING/  
SILTING UP OF DITCH DURING ITS LIFETIME.

Refer to context [161354]

## SKETCHES

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

### SOUTH EAST FACING PROFILE



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                               |                            |                                       |                                                                                                                        |
|-------------------------------|----------------------------|---------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 TEA16</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15-BAR16</b> | Context number<br><b>161354</b>                                                                                        |
| ECB#                          | Subgroup                   | Parent context<br><b>[161354]</b>     | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |            |  |                 |
|--|--|---------------|------------|--|-----------------|
|  |  | <b>161353</b> |            |  | Same as context |
|  |  | <b>161354</b> |            |  | Cuts context    |
|  |  | <b>160003</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 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><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>N<br>                                                                                                                              | <b>Sides</b><br><input type="checkbox"/> vertical<br><input checked="" type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input checked="" type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                    |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br><b>2.0m</b>                                                                                                                                                                                                                                                             | <b>Width</b><br><b>0.9m - 1.0m</b>                                                                                                                                                                                                           | <b>Depth</b><br><b>0.4m - 0.5m</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>                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| frequency<br>bulk find                                                                                                                                                     | stones*<br>chalk<br>iron pan<br>manganese<br>charcoal<br>plant remains*<br>wood<br>marine shell<br>bone*<br>pot<br>fired clay / CBM<br>CTP<br>mortar/plaster<br>leather/textile<br>glass<br>metal<br>industrial waste<br>lithics<br>coarse stone                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
|                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |

## CROSS REFERENCE

|             |            |                                                                    |                                                                                                                                                                            |
|-------------|------------|--------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos. | Finds nos. | Photo nos.<br><b>1610-1612</b><br><b>1610682</b><br><b>1610683</b> | Drawing nos. <b># 20</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. NO. 162838</b> |
|-------------|------------|--------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                                 |
|-----------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> reuse <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>26/1/18</b>                                                                                             |
| Initials <b>HCB</b>                                                                                             |
| Checked by                                                                                                      |

# ADDITIONAL INFORMATION

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

SLOT EXCAVATED THROUGH ENCLOSURE DITCH [161354]

LINEAR DITCH ORIENTATED NW-SE CUT SHARPLY FROM SURFACE WITH STEEPLY SLOPING SIDES. BASE 'V' SHAPED TO THE NW AND THE SE.

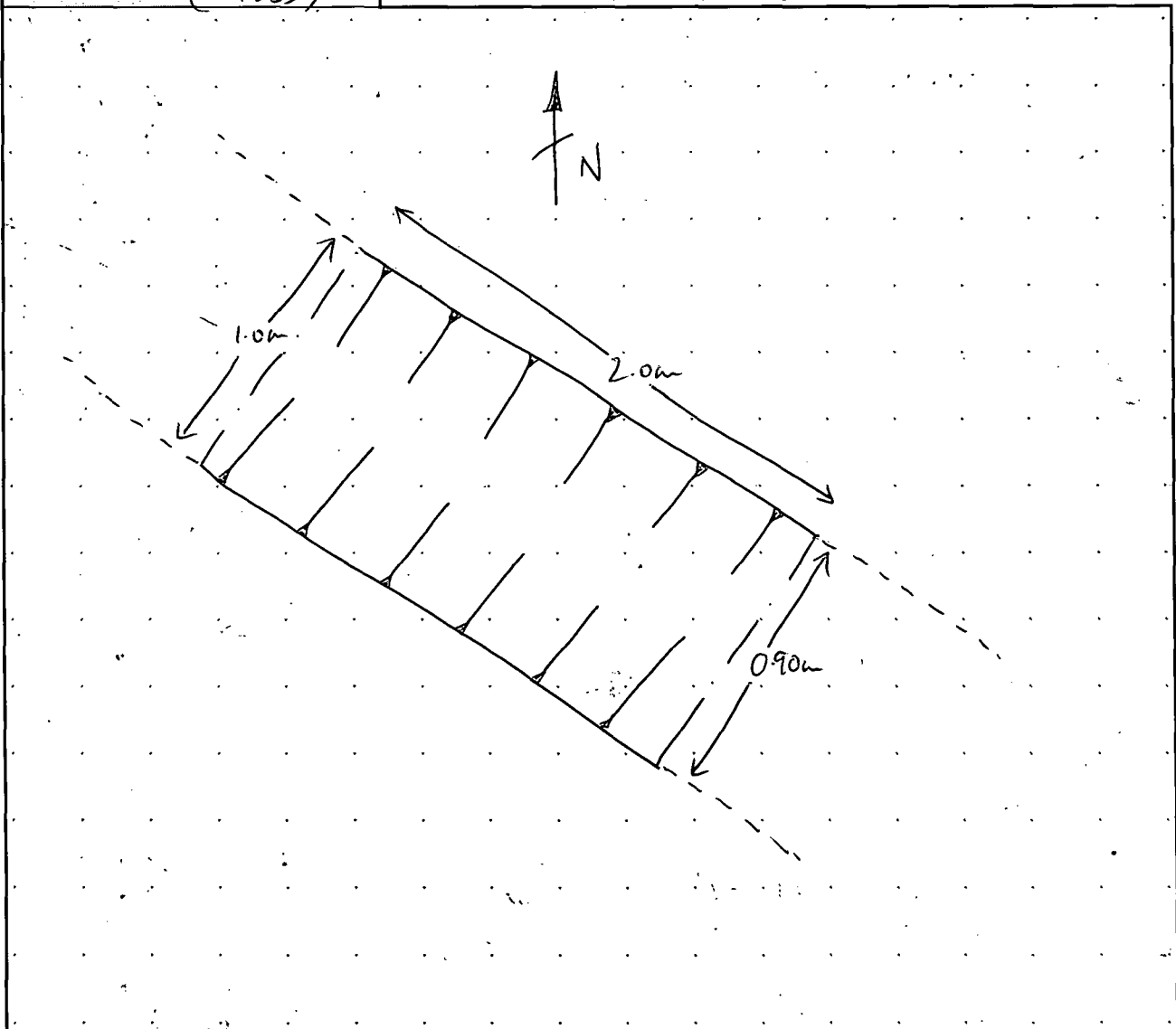
RELATED TO [161349] TO THE SOUTH EAST.

WATER TABLE ENCOUNTERED 0.50m FROM TOP OF CUT.

Refer to context (161352)  
(161353)

## 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>TEA16</b> | Sub-area/Trench<br><b>TEA15 TO BARROW</b> | Context number<br><b>(161355)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>161356</b>           | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (+)      |  |  | Same as context |
|  |  | (161355) |  |  | Cuts context    |
|  |  | 161356   |  |  | Cut by context  |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |  | <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 checked="" 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>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"/> <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 type="checkbox"/> clay<br>silty <input type="checkbox"/> <input checked="" type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat | <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>0.24m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br><table border="1"> <tr> <td>use the following:<br/>O: occasional<br/>M: moderate<br/>F: frequent</td> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td>O</td> <td></td> <td></td> <td></td> <td></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 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> <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> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 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 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"/> |
| 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 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"/> |              |                  |         |              |           |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |

## CROSS REFERENCE

|            |           |                                                                                                                        |             |
|------------|-----------|------------------------------------------------------------------------------------------------------------------------|-------------|
| Sample nos | Finds nos | Photo nos                                                                                                              | Drawing nos |
|            |           | 1610684<br>(101-0014)                                                                                                  | 23          |
|            |           | 1610685<br>(101-0015)                                                                                                  |             |
|            |           | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |             |
|            |           | 016340                                                                                                                 |             |

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>14</b>                                                                                     |
| Initials <b>26.1.18</b>                                                                            |
| Checked by                                                                                         |

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

# ADDITIONAL INFORMATION

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

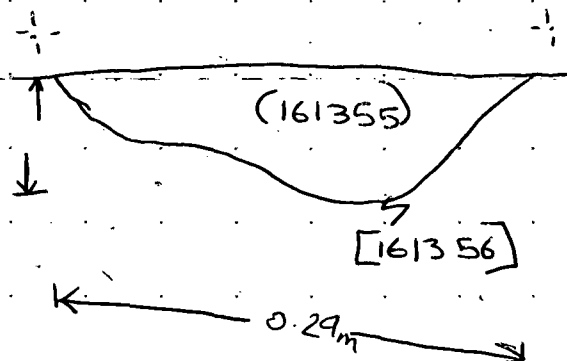
single fill of pit,  
contained no finds  
and was almost completely  
sterile except for some occasional  
sub angled stone.

Refer to context (161355)

## SKETCHES

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

NE facing section



N.T.S



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                           |                                                                                                                        |
|-------------------------|----------------------------|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15 TO BARROW</b> | Context number<br><b>[161356]</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>[161356]</b>         | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |  |
|--|--|----------|--|--|-----------------|--|
|  |  | (161355) |  |  | Same as context |  |
|  |  | [161356] |  |  | Cuts context    |  |
|  |  | 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 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 checked="" type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br><input checked="" type="checkbox"/> N                                                                                                     | <b>Sides</b><br><input type="checkbox"/> vertical<br><input 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 type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input checked="" type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     | <b>Length</b><br>1.17m                                                                                                                                                                                                                                                                   | <b>Width</b><br>0.37m                                                                                                                                                                                                                        | <b>Depth</b><br>0.29m | <b>Diameter</b><br>0.72m |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| <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"/> | <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>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                      | <b>Inclusions</b><br><table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td></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

|            |           |                                                |                                                                                                                                  |
|------------|-----------|------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                      | Drawing nos                                                                                                                      |
|            |           | 1610684<br>(101-0014)<br>1610685<br>(101-0015) | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16340 |

|                                       |                                                              |
|---------------------------------------|--------------------------------------------------------------|
| Basic process                         |                                                              |
| construction <input type="checkbox"/> | use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date                                  | 26.1.18                                                      |
| Initials                              | KK                                                           |
| Checked by                            |                                                              |

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

# ADDITIONAL INFORMATION

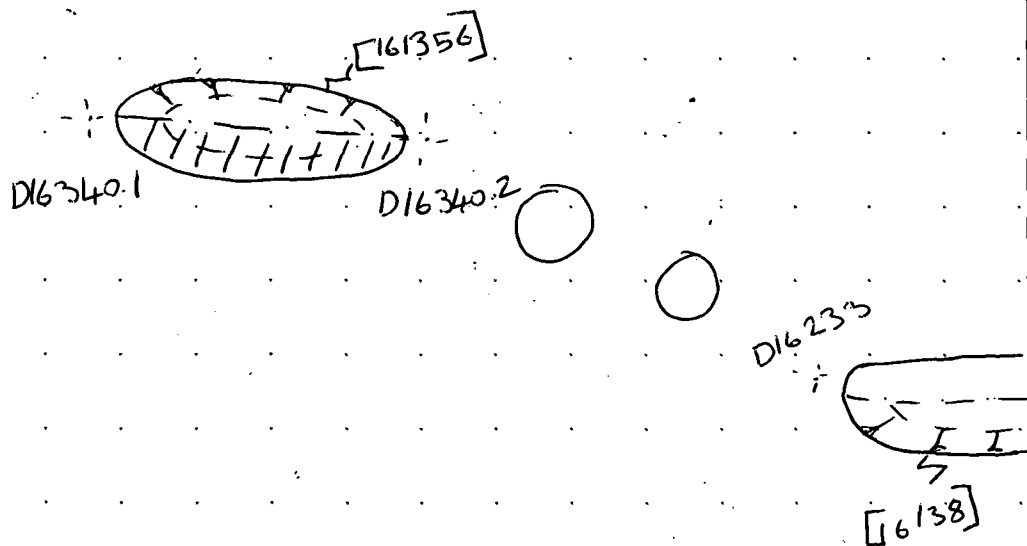
(any further details that may be important for understanding the context, including items marked \* overleaf)

cut of pit, grouped among  
the pit alignment  
One fill in pit of (161355)  
pit is deeper at the most Northern  
end and becomes abit shallower  
towards South end.

Refer to context [161356]

## SKETCHES

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



N.T.S

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                      |                                                                                                                        |
|-------------------------|----------------------------|--------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA-BARROW</b> | Context number<br><b>161357</b>                                                                                        |
| ECB#                    | Subgroup                   | Parent context<br><b>[161358]</b>    | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>16002</b>  |  |  | Same as context |
|  |  | <b>161357</b> |  |  | Cuts context    |
|  |  | <b>161358</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>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>[ <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>U <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>[ <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of (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 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 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 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 <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"/>                                                                                                                                                    | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <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>2</b> | Finds nos<br><b>X</b> | Photo nos<br><b>1610692</b><br><b>1610693</b> | Drawing nos <b>4 29</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/><br><b>D16342</b> |
|------------------------|-----------------------|-----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>28/1/18</b>                                                                                |
| Initials <b>SBT</b>                                                                                |
| Checked by                                                                                         |

# ADDITIONAL INFORMATION :

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

FILL OF LINEAR PIT [161358] OCCASIONAL ANGULAR > SUBANGULAR FUNTS  
AND CHARCOAL FLECK 10-20mm

8. OCCASIONAL PCAGRI + PERMANGANATE AND BIODURATION RADIATING FROM  
FEATURE INDICATES POSSIBLE HEDGE ROW PLANTING. SEE OBSERVED IN  
SEVERAL LOCATIONS ALONG THE LINE OF FEATURES

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>A164</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15-B1604</b> | Context number<br><b>161358</b>                                                                                        |
| ECB #                    | Subgroup                   | Parent context<br><b>161358</b>       | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161357</b> |  |  | Same as context |
|  |  | <b>161358</b> |  |  | Cuts context    |
|  |  | <b>161003</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 checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                              |                      | pit <input checked="" type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input checked="" type="checkbox"/> NW-SE<br>N<br>                                                                                                                                 | <b>Sides</b><br>[ <input type="checkbox"/> vertical<br>[ <input type="checkbox"/> steep<br>[ <input checked="" type="checkbox"/> moderate sloping<br>[ <input type="checkbox"/> gentle<br>[ <input type="checkbox"/> stepped<br>[ <input type="checkbox"/> undercutting<br>[ <input type="checkbox"/> complex* | <b>Base</b><br>[ <input type="checkbox"/> flat<br>[ <input checked="" type="checkbox"/> concave<br>[ <input type="checkbox"/> v-shaped<br>[ <input type="checkbox"/> sloping<br>[ <input type="checkbox"/> uneven<br>[ <input type="checkbox"/> complex* |                              |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     | <b>Length</b><br><b>2.60m</b>                                                                                                                                                                                                                                                                                  | <b>Width</b><br><b>0.72m</b>                                                                                                                                                                                                                             | <b>Depth</b><br><b>0.27m</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"/> | 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>—                                                                                                                                                      | 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* <input type="checkbox"/> chalk <input type="checkbox"/> iron bar <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<br><b>1610692</b><br><b>1610693</b> | Drawing nos <b>#923</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16342</b> |
|------------|-----------|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

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

|                     |
|---------------------|
| Date <b>25/1/18</b> |
|---------------------|

|                     |
|---------------------|
| Initials <b>SOT</b> |
|---------------------|

|            |
|------------|
| Checked by |
|------------|

# ADDITIONAL INFORMATION

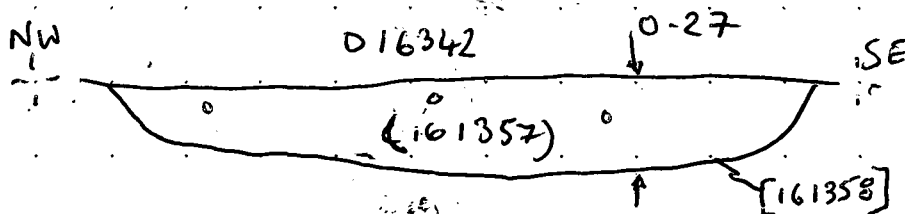
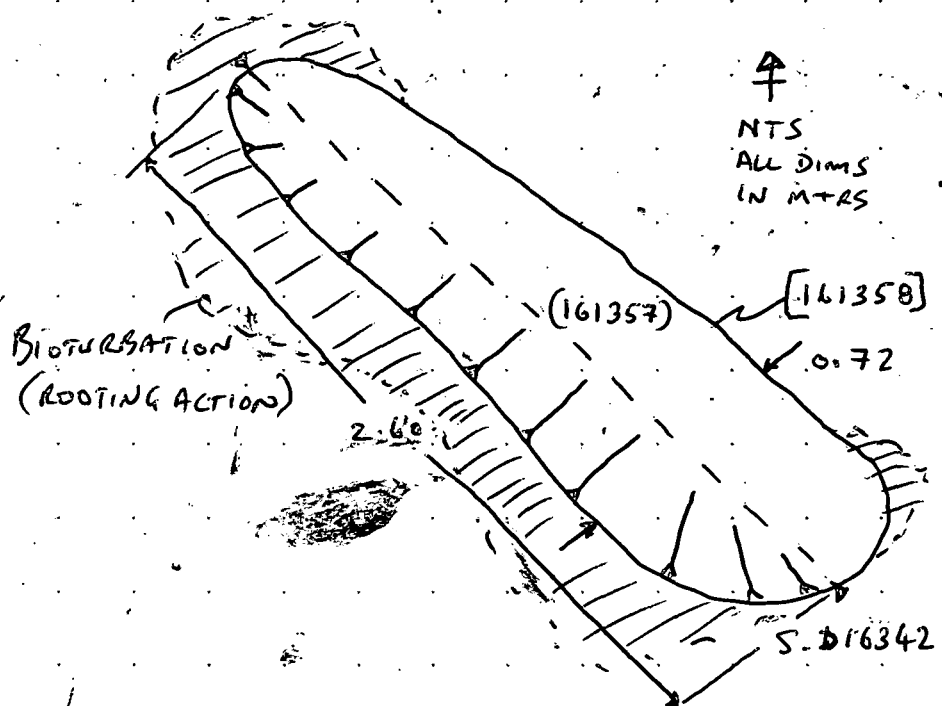
(any further details that may be important for understanding the context, including items marked \*overleaf)

POSSIBLE CUT FOR HEDGEROW, & SIDES OF CUT EVIDENCE OF  
HEAVY BIOTURBATION EXTENDING 0.30m AROUND EDGE.

## 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>A14</b> | Area/field<br><b>TEA 16</b> | Sub-area/Trench<br><b>TEA 15-BANOW</b> | Context number<br><b>161359</b>                                                                                        |
| ECB#                    | Subgroup                    | Parent context<br><b>[161359]</b>      | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161360</b> |  |  | Same as context |
|  |  | <b>161359</b> |  |  | Cuts context    |
|  |  | <b>160003</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>I <input checked="" type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>(N arrow)                                                                                                             | <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 checked="" 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 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><b>0.55</b>                                                                                                                                                                                                                                                                                   | <b>Width</b><br><b>0.5</b>                                                                                                                                                                                                                               | <b>Depth</b><br><b>0.1</b> | <b>Diameter</b><br><b>0.5</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue* <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| stones* <input type="checkbox"/> 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<br><b>A</b> | Finds nos<br><b>2</b> | Photo nos<br><b>1610086</b><br><b>1610687</b> | Drawing nos <b>#23</b><br>Surveyed: <b>D.16237</b><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|------------------------|-----------------------|-----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>26/1/18</b>                                                                                |
| Initials <b>RS</b>                                                                                 |
| Checked by                                                                                         |



# ADDITIONAL INFORMATION

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

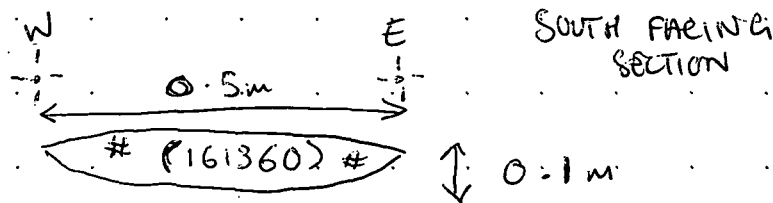
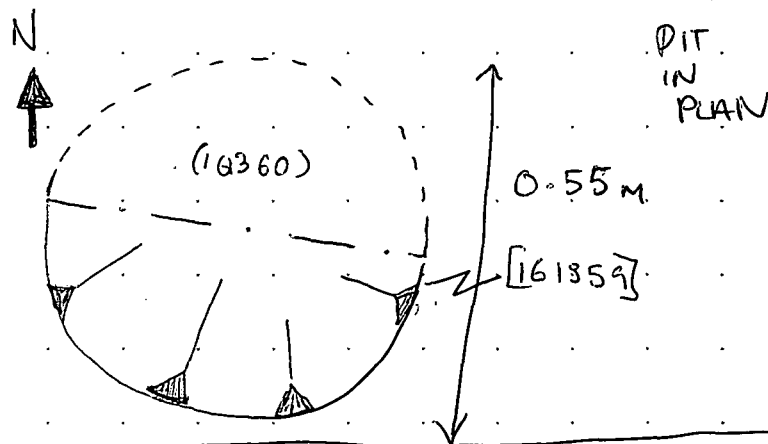
HALF SECTION OF SHALLOW D.T. TOP PART  
OF PIT PROBABLY MACHINED AWAY

PIT CUT INTO GREY SILTY NATURAL  
POSSIBLY A SOLUTION HOLLOW IN THE  
CLAY

Refer to context

## SKETCHES

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



key # = Charcoal

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                          |                                                                                                             |
|-------------------------|----------------------------|------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| Site code<br><b>414</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15 - BARROW</b> | Context number<br><b>16360</b>                                                                              |
| ECB #                   | Subgroup                   | Parent context<br><b>C161359</b>         | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (160002) |  |  | Same as context |
|  |  | 161360   |  |  | Cuts context    |
|  |  | 161359   |  |  | Cut by context  |

## CUT

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

## DESCRIPTION

## INTERPRETATION

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

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> | <b>Composition</b><br>clayey <input 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 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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 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 checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|                        |                       |                                              |                                                                                                                                                                     |
|------------------------|-----------------------|----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>α</b> | Finds nos<br><b>α</b> | Photo nos<br><b>161086</b><br><b>1610687</b> | Drawing nos<br><b>#20</b><br>Surveyed: <b>D. 16237</b><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|------------------------|-----------------------|----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>26.1.18</b>                                                                                           |
| Initials <b>RM</b>                                                                                            |
| Checked by                                                                                                    |

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

Pit

*Refer to context*

161359

(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 16     | TEA 15 TO BARROW | 161361                                                                                                 |
| ECB #     | Subgroup   | Parent context   | Context type                                                                                           |
|           |            | 161362           | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | SUB-Soil |  |  | Same as context |
|  |  | 161361   |  |  | Cuts context    |
|  |  | 161362   |  |  | 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>I <input type="checkbox"/> E-W</p> <p>I <input type="checkbox"/> NE-SW</p> <p>I <input type="checkbox"/> NW-SE</p> <p>N <input type="checkbox"/></p>                                                                                | <p>L <input type="checkbox"/> vertical</p> <p>L <input type="checkbox"/> steep</p> <p>L <input type="checkbox"/> moderate sloping</p> <p>L <input type="checkbox"/> gentle</p> <p>L <input type="checkbox"/> stepped</p> <p>L <input type="checkbox"/> undercutting</p> <p>L <input type="checkbox"/> complex*</p> | <p>I <input type="checkbox"/> flat</p> <p>I <input type="checkbox"/> concave</p> <p>I <input type="checkbox"/> v-shaped</p> <p>I <input type="checkbox"/> sloping</p> <p>I <input type="checkbox"/> uneven</p> <p>I <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 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 checked="" 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 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 checked="" 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 checked="" type="checkbox"/> silt <input checked="" type="checkbox"/></p> <p>sandy <input checked="" type="checkbox"/> sand <input checked="" 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"/>                                                                                                                                                                                                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| 0.34                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Inclusions                                                                                                                                                                          |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                   | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                                             | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       | plant remains*           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       | wood                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       | marine shell             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       | bone*                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       | pot                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       | fired clay / CBM         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       | CTP                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       | mortar/plaster           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       | leather/textile          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       | glass                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       | metal                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       | industrial waste         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       | lithics                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                       | coarse stone             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| frequency                                                                                                                                                                           | M                        | O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | O                        | O                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| bulk find                                                                                                                                                                           | <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 |
|                                                                                                           |           | 1610689-91 | # 2-3       |
| Surveyed:                                                                                                 |           |            |             |
| plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |           |            |             |
| D. 16239                                                                                                  |           |            |             |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date: 24/1/17                                                                                                 |
| Initials: RW                                                                                                  |
| Checked by:                                                                                                   |

# ADDITIONAL INFORMATION

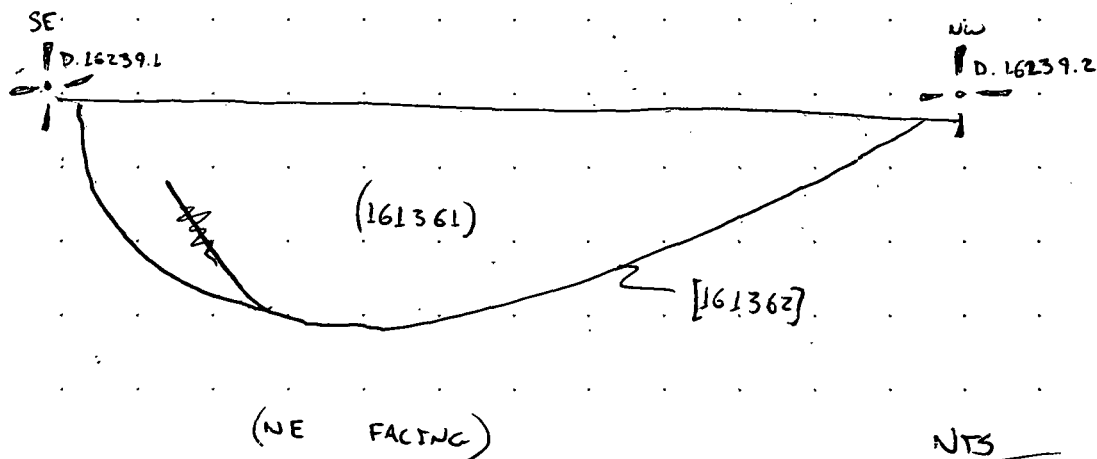
(any further details that may be important for understanding the context, including items marked \* overleaf)

SOLE FILL OF PIT [161362]: SILTY SAND WITH OCC. DULL RED MOTTLES, MOD GRAVEL \*, OCC CHARCOAL, OCC MANGANESE + OCC FRAGS OF Fe PAN.

Refer to context 161362

## SKETCHES

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



\* ROUGH REPRESENTATION OF D. 16239.

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                                           |                                                                                                                        |
|-------------------------|-----------------------------|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>TEALS TO BARROW</b> | Context number<br><b>161362</b>                                                                                        |
| ECB#                    | Subgroup                    | Parent context<br><b>161362</b>           | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                         |
|--|--|---------------|--|--|-------------------------|
|  |  | <b>161361</b> |  |  | Same as context         |
|  |  | <b>161362</b> |  |  | Cuts context <b>NAT</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 checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                               |                              |                 | pit <input checked="" type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>II <input type="checkbox"/> E-W<br>III <input type="checkbox"/> NE-SW<br>IV <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                                        | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>II <input checked="" type="checkbox"/> steep<br>III <input checked="" type="checkbox"/> moderate<br>IV <input type="checkbox"/> gentle<br>V <input type="checkbox"/> stepped<br>VI <input type="checkbox"/> undercutting<br>VII <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>II <input checked="" type="checkbox"/> concave<br>III <input type="checkbox"/> v-shaped<br>IV <input type="checkbox"/> sloping<br>V <input type="checkbox"/> uneven<br>VI <input type="checkbox"/> complex* |                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     | <b>Length</b><br><b>1.3-</b>                                                                                                                                                                                                                                                                                             | <b>Width</b><br><b>0.95-</b>                                                                                                                                                                                                                                  | <b>Depth</b><br><b>0.34-</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>                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| frequency                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| bulk find                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS-REFERENCE

|            |          |                                                                                                                                           |             |
|------------|----------|-------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| Sample nos | Find nos | Photo nos                                                                                                                                 | Drawing nos |
|            |          | <b>1610689 - 91</b>                                                                                                                       | <b>#23</b>  |
|            |          | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. 16139</b> |             |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>26/1/17</b>                                                                                           |
| Initials <b>RLK</b>                                                                                           |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

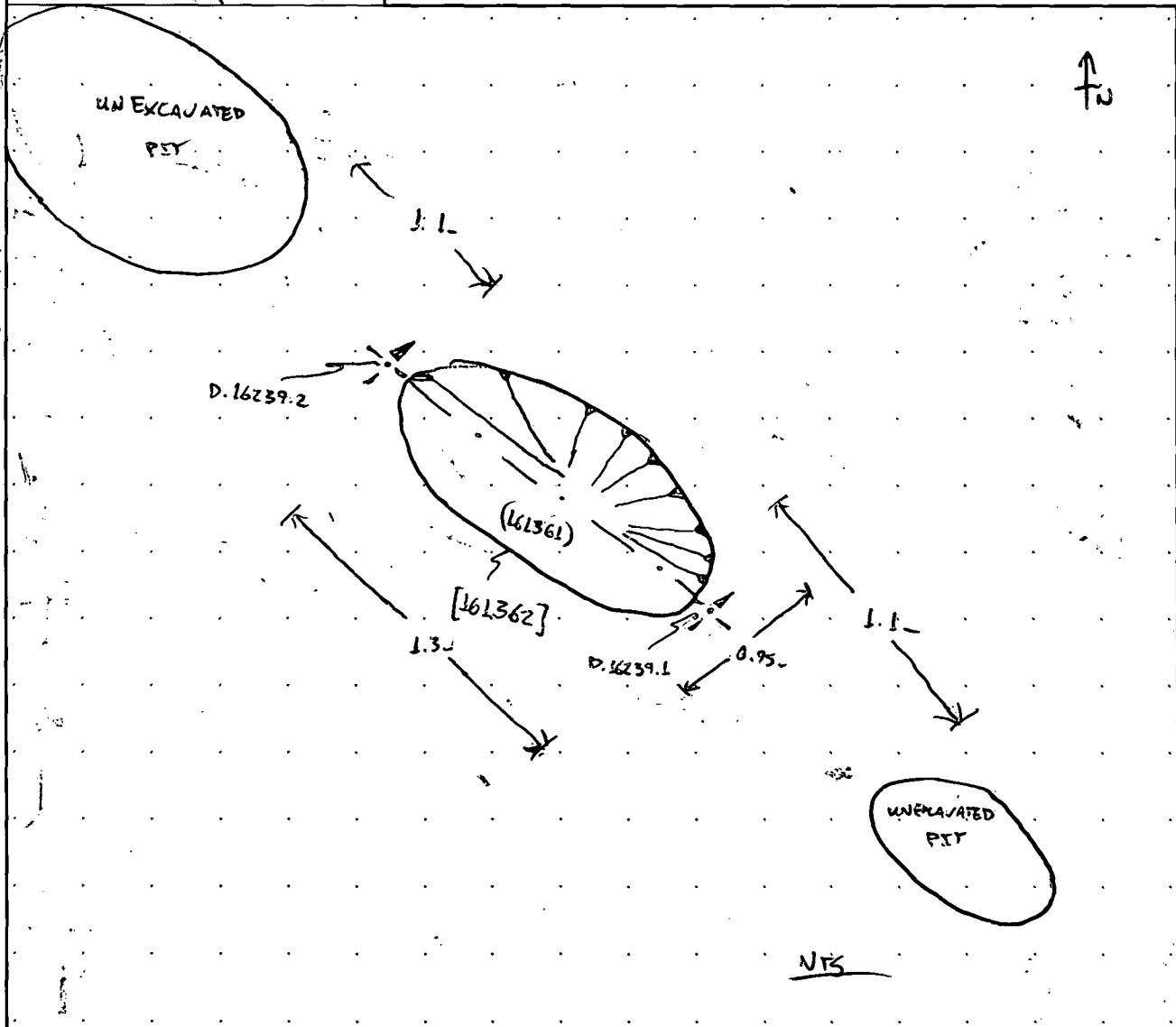
(any further details that may be important for understanding the context, including items marked \* overleaf)

CUT OF PIT FILLED ONLY BY (161361). ~~SH~~ SHARP B.O.S. TOP, STEEP-CURVED SE SIDE- MOD NW SIDE, ROUNDED B.O.S. BASE. PART OF LINE OF PITS RUNNING ACROSS SITE.

Refer to context: (161361)

## 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>TEA16</b> | Sub-area/Trench<br><b>TEA15-BARROW</b> | Context number<br><b>161363</b>                                                                                        |
| ECB//                   | Subgroup                   | Parent context<br><b>[161363]</b>      | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161364</b> |  |  | Same as context |
|  |  | <b>161363</b> |  |  | Cuts context    |
|  |  | <b>160003</b> |  |  | Cut by context  |

## CUT

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

## DESCRIPTION

|                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                  |              |                                                                                                                                                                                                                               |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <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 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"/> 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 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>0.60m</b>                                                                                                                                                                                                                                                                     | <b>0.55m</b> | <b>0.23m</b>                                                                                                                                                                                                                  | <b>0.6m</b>     |
| <b>Shape result of</b> (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"/>                                                            |                                                                                                                                                                                                                                                                                  |              |                                                                                                                                                                                                                               |                 |

## INTERPRETATION

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

## FILL/DEPOSIT

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

## DESCRIPTION

|                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------------------|---------|--------------|-----------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-----------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <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><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><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><br>other* <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b>                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b>                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 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"/> |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <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>α</b>          | <b>α</b>         | <b>1610697</b><br><b>1610698</b> | <b>#20</b><br>Surveyed <b>2/11/18</b><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D.16343</b> |

## Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>26/1/18</b>                                                                                                      |
| Initials <b>R.H.</b>                                                                                                     |
| Checked by                                                                                                               |

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

# ADDITIONAL INFORMATION

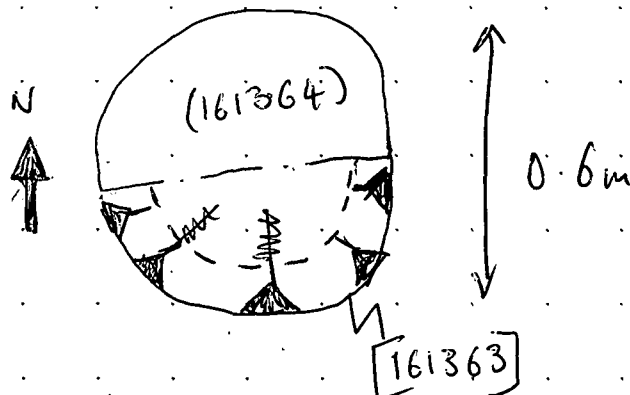
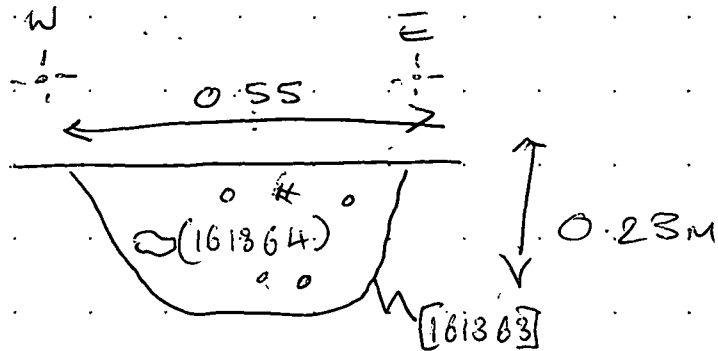
(any further details that may be important for understanding the context, including items marked \*overleaf)

LARGE POST HOLE WITH POSSIBLE BRONZE  
AGE POT IN FILL

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>TEA16</b> | Sub-area/Trench<br><b>TEA15-BARROW</b> | Context number<br><b>161364</b>                                                                                        |
| ECB #                   | Subgroup                   | Parent context<br><b>[161363]</b>      | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  |               |  |  | Same as context |
|  |  | <b>161364</b> |  |  | Cuts context    |
|  |  | <b>161363</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 checked="" type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                          |              |                 | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>H <input type="checkbox"/> E-W<br>V <input type="checkbox"/> NE-SW<br>W <input type="checkbox"/> NW-SE<br>N <input checked="" type="checkbox"/>                                                                                                 | <b>Sides</b><br>L <input checked="" type="checkbox"/> vertical<br>\ <input type="checkbox"/> steep<br>/ <input type="checkbox"/> moderate<br>~ <input type="checkbox"/> gentle<br>Z <input type="checkbox"/> stepped<br>U <input type="checkbox"/> undercutting<br>X <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>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 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 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 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>0-23</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"/> 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 checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |                                               |                                                                                                                                                                     |
|------------|-----------|-----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos<br><b>1610697</b><br><b>1610698</b> | Drawing nos<br><b>#20</b><br>Surveyed: <b>D.163843</b><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|------------|-----------|-----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>26/1/18</b>                                                                                                      |
| Initials <b>RH</b>                                                                                                       |
| Checked by                                                                                                               |

# ADDITIONAL INFORMATION

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

NATURAL INFILLING OF POST HOLE. BRONZE AGE POT FOUND WITHIN

Refer to context

161363

## SKETCHES

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

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                               |                            |                                       |                                                                                                                        |
|-------------------------------|----------------------------|---------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 TEA16</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15-01/16</b> | Context number<br><b>161365</b>                                                                                        |
| ECB#                          | Subgroup                   | Parent context<br><b>2161366</b>      | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |  |
|--|--|---------------|--|--|-----------------|--|
|  |  | <b>160002</b> |  |  | Same as context |  |
|  |  | <b>16135</b>  |  |  | Cuts context    |  |
|  |  | <b>161366</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>                                                                                                                                         | <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* |              |                 |
| <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"/>                                                                       |                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                    |              |                 |

- ☐ 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

|                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <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 type="checkbox"/> dark <input checked="" 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"/> | 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"/> |  |
| <b>Thickness</b>                                                                                                                                                 | <b>other*</b> <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                          |  |
| <b>0.17m</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*<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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                          |  |
| bulk find                                                                                                                                                        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                          |  |

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

## CROSS REFERENCE

|            |           |                                                    |                                                                                                                                                         |
|------------|-----------|----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                          | Drawing nos                                                                                                                                             |
| <b>2</b>   | <b>2</b>  | <b>1610702</b><br><b>1610703</b><br><b>1610704</b> | <b>#20</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. 16246</b> |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>29/1/18</b>                                                                                           |
| Initials <b>ACB</b>                                                                                           |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

MODERATELY COMPACTED, MID ORANGEY BROWN SANDY SILT  
WITH AN OCC. SMALL ANGULAR PEBBLE, OCC. FLECK OF  
CHARCOAL.

FILE OF P/4 [161366]

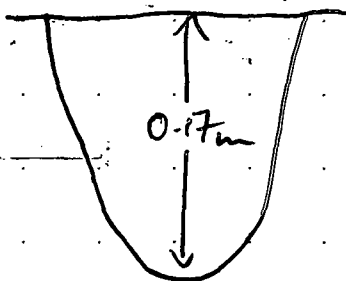
Refer to context [161366]

## SKETCHES

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

SE

~~NEW~~ FACING SECTION





# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                            |                            |                                            |                                                                                                                        |
|----------------------------|----------------------------|--------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>161365</b> | Area/Field<br><b>TPA16</b> | Sub-area/Trench<br><b>TPA15 - Backfill</b> | Context number<br><b>161366</b>                                                                                        |
| ECB#                       | Subgroup                   | Parent context<br><b>[161366]</b>          | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |            |  |                 |
|--|--|---------------|------------|--|-----------------|
|  |  | <b>161365</b> |            |  | Same as context |
|  |  | <b>161366</b> |            |  | Cuts context    |
|  |  | <b>160003</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 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"/> |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          | <b>INTERPRETATION</b><br>pit <input type="checkbox"/><br>post-hole <input checked="" type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>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 checked="" 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 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                                                                                                                                                                                                                                                                                     | Length <b>0.25m</b> <b>0.16m</b><br>Width <b>0.16m</b><br>Diameter <b>0.17m</b>                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" 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"/> | <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"/> | <b>INTERPRETATION</b><br>topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| frequency<br>bulk find <input type="checkbox"/>                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |

## CROSS REFERENCE

|                                                                  |                                                                 |                                                                 |                                                                   |
|------------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-------------------------------------------------------------------|
| Sample nos<br><b>1610702</b><br><b>1610703</b><br><b>1610704</b> | Finds nos<br><b>1610702</b><br><b>1610703</b><br><b>1610704</b> | Photo nos<br><b>1610702</b><br><b>1610703</b><br><b>1610704</b> | Drawing nos<br><b>1610702</b><br><b>1610703</b><br><b>1610704</b> |
|------------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>29/1/18</b>                                                                                           |
| Initials <b>AB</b>                                                                                            |
| Checked by                                                                                                    |



# ADDITIONAL INFORMATION

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

VERTICALLY SIDED, SUBCIRCULAR CUT WITH NARROW  
CONCAVE BASE.

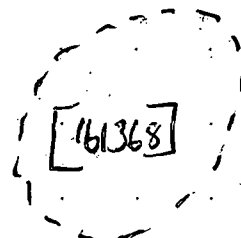
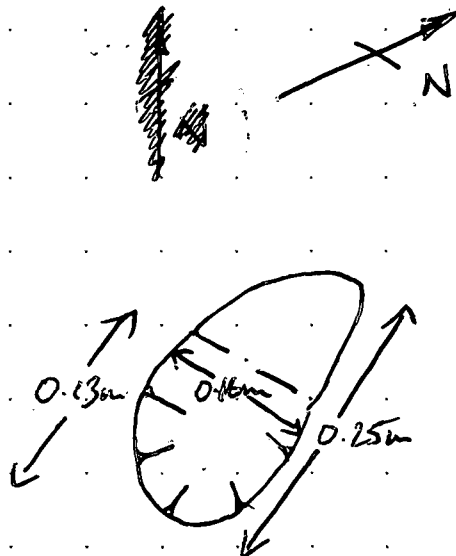
HALF SECTIONED

POSSIBLY ASSOCIATED WITH [161368] TO THE SE.

Refer to context (161365)

## SKETCHES

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



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                               |                            |                                        |                                                                                                                        |
|-------------------------------|----------------------------|----------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 TEA16</b> | Area/field<br><b>TEA16</b> | Sub-area/trench<br><b>TEA15-BARROW</b> | Context number<br><b>161367</b>                                                                                        |
| ECB#                          | Subgroup                   | Parent context<br><b>[161368]</b>      | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>160002</b> |  |  | Same as context |
|  |  | <b>161367</b> |  |  | Cuts context    |
|  |  | <b>161368</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>(arrow)                                                                                                               | <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 type="checkbox"/> v-shaped<br>S <input type="checkbox"/> sloping<br>U <input type="checkbox"/> uneven<br>C <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input 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"/>                                                                                                                                                                                                                                                                                                        | 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>0.14m</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>0</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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |

## CROSS REFERENCE

|                        |                       |                                               |                                                                                                                                                                         |
|------------------------|-----------------------|-----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>2</b> | Finds nos<br><b>4</b> | Photo nos<br><b>1610705</b><br><b>1610706</b> | Drawing nos<br><b>1 20</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. 16247</b> |
|------------------------|-----------------------|-----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>29/1/18</b>                                                                                           |
| Initials <b>HCB</b>                                                                                           |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

MODERATELY COMPACTED, ORANSEY BROWN SANDY SILT  
WITH AN OCEAN SMALL ANGULAR PEBBLE, OCEAN ROOT MASS,  
OCEAN FLECK OF CHARCOAL  
FIN OF P14 [161368].

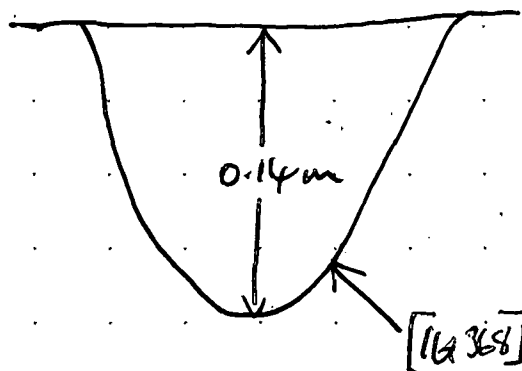
Refer to context

[161368]

## SKETCHES

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

SE FACING SECTION



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                                |            |                 |                                                                                                                        |
|--------------------------------|------------|-----------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 TBA 16</b> | Area/Field | Sub-area/Trench | Context number<br><b>16368</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>16367</b>  |            |  | Same as context |
|  |  | <b>16368</b>  |            |  | Cuts context    |
|  |  | <b>160003</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 checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                              |  | pit <input type="checkbox"/><br>post-hole <input checked="" type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>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 checked="" type="checkbox"/> vertical<br>\ <input type="checkbox"/> steep<br>~ <input type="checkbox"/> moderate sloping<br>/ <input type="checkbox"/> gentle<br>~ <input type="checkbox"/> stepped<br>Z <input type="checkbox"/> undercutting<br>[ <input type="checkbox"/> complex* | <b>Base</b><br>— <input type="checkbox"/> flat<br>U <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>0.31m NW-SE</b>                                                                                                                                                                                                                                                                            | <b>Width</b><br><b>0.19m SW-NE</b>                                                                                                                                                                                                                       | <b>Depth</b><br><b>0.14m</b> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" 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"/> | <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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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                                                                                                                                              |
|            |           | <b>1610705</b><br><b>1610706</b> | <b>H 20</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. 16247</b> |

## Basic process

|                                                  |                              |                                 |
|--------------------------------------------------|------------------------------|---------------------------------|
| construction <input checked="" type="checkbox"/> | use <input type="checkbox"/> | disuse <input type="checkbox"/> |
| Date                                             | <b>29/1/18</b>               |                                 |
| Initials                                         | <b>HCB</b>                   |                                 |
| Checked by                                       |                              |                                 |

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

# ADDITIONAL INFORMATION

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

VERTICALLY SIDED, SUBCIRCULAR CUT WITH NARROW  
CONCAVE BASE

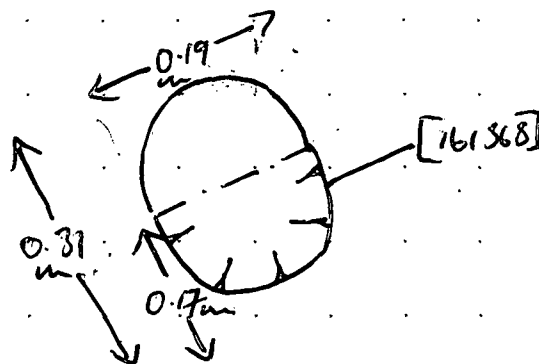
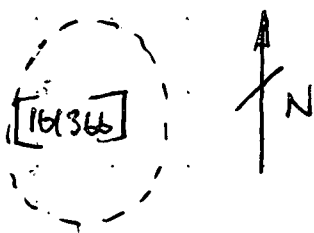
HALF SECTIONED

POSSIBLY ASSOCIATED WITH [161366] TO THE NW

Refer to context [161367]

## SKETCHES

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



### STRATIGRAPHY:-

|  |  |          |  |  |                 |  |
|--|--|----------|--|--|-----------------|--|
|  |  | (160002) |  |  | Same as context |  |
|  |  | (161369) |  |  | Cuts context    |  |
|  |  | [161370] |  |  | Cut by context  |  |

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

## INTERPRETATION

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

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

## INTERPRETATION

[illegible]

### Basic process

| Sample nos | Finds nos | Photo nos            | Drawing nos # 25                                                                                                                   | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|------------|-----------|----------------------|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| 2          | 2         | 16.10696<br>16.10696 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D. 16244 | Date 1/12/18<br>Initials SN<br>Checked by                                                                     |

# ADDITIONAL INFORMATION

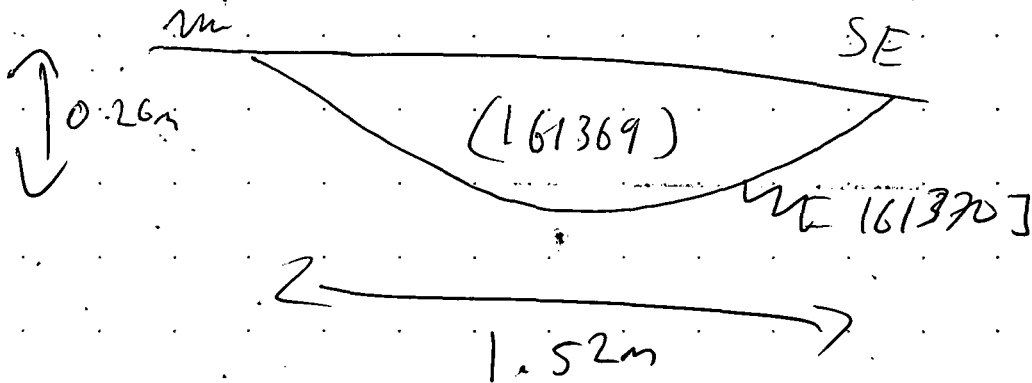
(any further details that may be important for understanding the context, including items marked \* overleaf)

SINGLE FIL OF SHALLOW ELONGATED PIT [161370],  
FILL WAS HOMOGENEOUS AND CONTAINED NO FINDS.  
FILL HAD SOME CRACKLING BUT LOOKED NOT LIKE IN SECTION.

Refer to context

## SKETCHES

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







|                         |                            |                                        |                                                                                                             |
|-------------------------|----------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA16 - West</b> | Context number<br><b>E161370</b>                                                                            |
| ECB#                    | Subgroup                   | Parent context<br><b>E161370</b>       | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161369)</b> |  |  | Same as context |
|  |  | <b>E161370</b>  |  |  | Cuts context    |
|  |  | <b>E160003</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 checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                          |                       |                      | pit <input checked="" type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input checked="" type="checkbox"/> NW-SE<br>N                                                                                                                                     | <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 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>—                                                                                                                                                                                                                                                                                     | <b>Width</b><br>1.52m                                                                                                                                                                                                                                    | <b>Depth</b><br>0.26m | <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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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**

|                                                                                                                        |                       |                                               |                                             |
|------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------------------------------|---------------------------------------------|
| Sample nos<br><b>L</b>                                                                                                 | Finds nos<br><b>2</b> | Photo nos<br><b>1610694</b><br><b>1610696</b> | Drawing nos<br><b>#23</b><br><b>D.16244</b> |
| 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 <b>1/2/18</b>                                                                                            |
| Initials <b>JW</b>                                                                                            |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

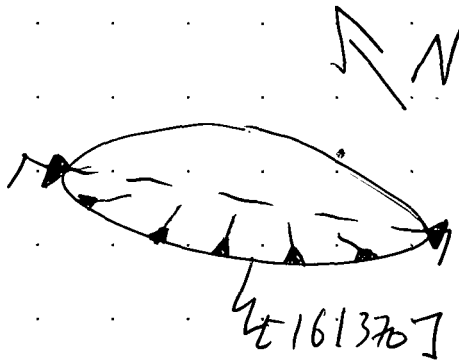
CUT OF SHALLOW PITS WITH A SINGULAR SETTING  
EVENT.

PART OF LARGER ROW OF SHALLOW PITS RUNNING  
NW - SE INTO TPA 15.

Refer to context

## SKETCHES

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



## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 161372 |  |  | Same as context |
|  |  | 161371 |  |  | Cuts context    |
|  |  | 160003 |  |  | 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 checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input checked="" type="checkbox"/> other* <input type="checkbox"/> |                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                                                                                                                                                                                                                                                         |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input checked="" type="checkbox"/> NW-SE                                                    |                         | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <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*         </div> <div style="font-size: 3em; margin-right: 10px;">}</div> <div>           sloping         </div> </div> |                        | <b>Base</b><br><input checked="" type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     | <b>Length</b><br>0.49 m | <b>Width</b><br>0.46 m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Depth</b><br>0.22 m | <b>Diameter</b><br>0.46 m                                                                                                                                                                                                                               |
| <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

| Compaction                                                        |                                             | Colour                                                                                                                     |                                 | Composition                       |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|---------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|---------------------------------|-----------------------------------|---------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input type="checkbox"/> moderately 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"/> loose                                    |                                             | brownish <input type="checkbox"/>                                                                                          | <input type="checkbox"/> brown  | silty <input type="checkbox"/>    | <input type="checkbox"/> silt   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> friable                                  |                                             | greyish <input type="checkbox"/>                                                                                           | <input type="checkbox"/> grey   | sandy <input type="checkbox"/>    | <input type="checkbox"/> sand   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | orangeish <input type="checkbox"/>                                                                                         | <input type="checkbox"/> orange | gravelly <input type="checkbox"/> | <input type="checkbox"/> gravel |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | yellowish <input type="checkbox"/>                                                                                         | <input type="checkbox"/> yellow | peaty <input type="checkbox"/>    | <input type="checkbox"/> peat   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | reddish <input type="checkbox"/>                                                                                           | <input type="checkbox"/> red    |                                   |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | blueish <input type="checkbox"/>                                                                                           | <input type="checkbox"/> blue   |                                   |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                             | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                              |                                 | other* <input type="checkbox"/>   |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Inclusions                                                        |                                             |                                                                                                                            |                                 |                                   |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                     | chalk                                                                                                                      | iron ban                        | 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 # 23                                                                                                                  | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| ✓          | ✗         | 1610701<br>1610700<br>1610699 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D.16245 | Date 29/1/18<br>Initials RSH<br>Checked by                                                                    |

# ADDITIONAL INFORMATION

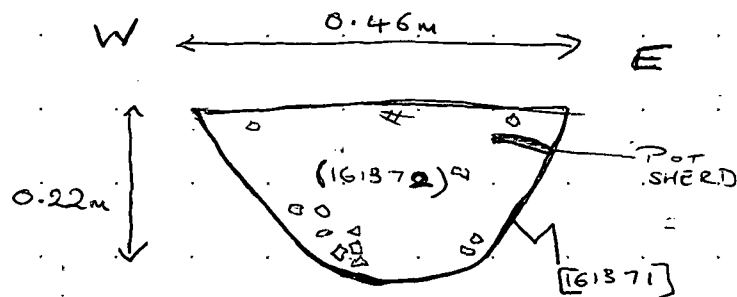
(any further details that may be important for understanding the context, including items marked \* overleaf)

POST HOLE WITH GRAVELLY FILL CONTAINING SOME  
VERY - SMALL POT SHERD IN BAD CONDITION.

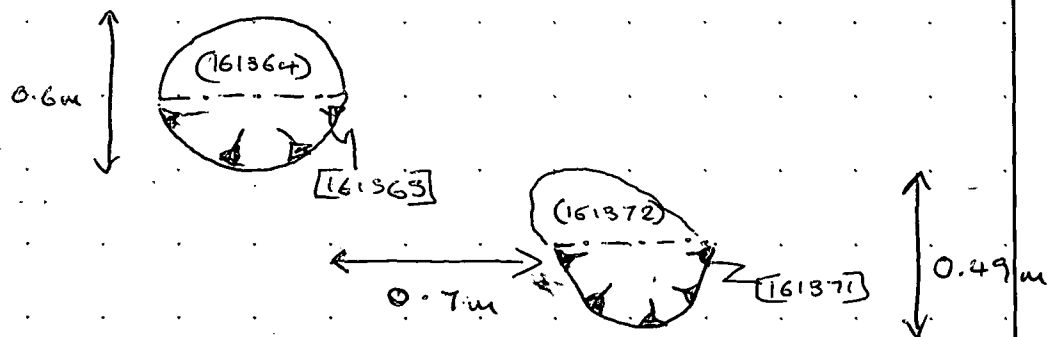
Refer to context

## SKETCHES

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



KEY  
# = CHARCOAL  
O = STONES





|                         |                            |                                          |                                                                                                                        |
|-------------------------|----------------------------|------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15 - BARROW</b> | Context number<br><b>161372</b>                                                                                        |
| ECB#                    | Subgroup                   | Parent context<br><b>161371</b>          | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

STRATIGRAPHIC MATRIX

STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  |               |  |  | Same as context |
|  |  | <b>161372</b> |  |  | Cuts context    |
|  |  | <b>161371</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 checked="" 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 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 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>0.2m</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>bulk find <input checked="" type="checkbox"/>                                                                                                                            | stones* <input checked="" 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 checked="" 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"/> |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| other* <input type="checkbox"/>                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

CROSS REFERENCE

|                         |                       |                                                     |                                                                                                                                                                                                           |
|-------------------------|-----------------------|-----------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>A1</b> | Finds nos<br><b>X</b> | Photo nos<br><b>1610701<br/>1610700<br/>1610699</b> | Drawing nos<br><b>1.23</b><br>Surveyed <input checked="" type="checkbox"/><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D.16245</b> |
|-------------------------|-----------------------|-----------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>29/1/18</b>                                                                                |
| Initials <b>RM</b>                                                                                 |
| Checked by                                                                                         |

# ADDITIONAL INFORMATION

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

FILL OF POST HOLE.

Refer to context

161371

## SKETCHES

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

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                           |                             |                                         |                                                                                                                        |
|---------------------------|-----------------------------|-----------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>TEA16</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>TEA15-Barrion</b> | Context number<br><b>(161373)</b>                                                                                      |
| ECB#                      | Subgroup                    | Parent context<br><b>161374</b>         | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  |               |  |  | Same as context |
|  |  | <b>161373</b> |  |  | Cuts context    |
|  |  | <b>161374</b> |  |  | 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 checked="" 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<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* |  | <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"/>                      |  |
| Dimensions                                                                                                                                                                                                                                                                              |  | Length                                                                                                                                                                                                                                                        |  | Width                                                                                                                                                                                                              |                                    | Depth                                               |  |
| in metres                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                    | Diameter                                            |  |
|                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                    | ring-ditch <input type="checkbox"/>                 |  |
|                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                    | beam slot <input type="checkbox"/>                  |  |
|                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                    | construction cut <input type="checkbox"/>           |  |
|                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                    | robber cut <input type="checkbox"/>                 |  |
|                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                    | gully <input type="checkbox"/>                      |  |
|                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                    | palaeochannel <input type="checkbox"/>              |  |
|                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                    | furrow <input type="checkbox"/>                     |  |
|                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                    | field boundary <input type="checkbox"/>             |  |
|                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                    | burial cut <input type="checkbox"/>                 |  |
|                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                    |                                    | other cut (describe below) <input type="checkbox"/> |  |
| 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                                                                                                                                                                                                                                                                                                                                              |  | 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 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"/> |  | 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"/>                  |  |
| Inclusions                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                          |  | remnant topsoil <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"/> |  |                                                                                                                                                                                                                                                                                                                                                          |  | surface <input type="checkbox"/>                             |  |
| frequency                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                          |  | occupation layer <input type="checkbox"/>                    |  |
| bulk find                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                          |  | dumped layer <input type="checkbox"/>                        |  |
|                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                          |  | deliberate backfill <input type="checkbox"/>                 |  |
|                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                          |  | destruction debris <input type="checkbox"/>                  |  |
|                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                          |  | bedding layer <input type="checkbox"/>                       |  |
|                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                          |  | natural infilling <input checked="" type="checkbox"/>        |  |
|                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                          |  | colluvial layer <input type="checkbox"/>                     |  |
|                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                          |  | in situ burning <input type="checkbox"/>                     |  |
|                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                          |  | post-pipe <input type="checkbox"/>                           |  |
|                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                          |  | packing <input type="checkbox"/>                             |  |
|                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                          |  | cremation <input type="checkbox"/>                           |  |
|                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                          |  | other fill/deposit (describe below) <input type="checkbox"/> |  |

### CROSS REFERENCE

|            |           |                                                                                                           |             |
|------------|-----------|-----------------------------------------------------------------------------------------------------------|-------------|
| Sample nos | Finds nos | Photo nos                                                                                                 | Drawing nos |
|            |           | 1610707                                                                                                   | #23         |
|            |           | 1610709                                                                                                   |             |
|            |           | Surveyed:                                                                                                 |             |
|            |           | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |             |
|            |           | D. 16248                                                                                                  |             |

### Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>29/1/18</b>                                                                                |
| Initials <b>KE</b>                                                                                 |
| Checked by                                                                                         |



# ADDITIONAL INFORMATION

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

FILL OF PIT ALIGNMENT  
WITH NO FINDS

Refer to context

181373

SKETCHES

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

SEE [181374]

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/field | Sub area/Trench | Context number                                                                                         |
| TEA16     | TEA16      | TEA15-6prc16    | 161374                                                                                                 |
| ECB#      | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [161374]        | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 161373 |  |  | Same as context |
|  |  | 161374 |  |  | Cuts context    |
|  |  | 160003 |  |  | 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 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"/> |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                               |       |          |
| Orientation                                                                                                                                                                                                                                                                             | Sides                                                                                                                                                                                                                                                                            | Base                                                                                                                                                                                                                          |       |          |
| <input checked="" 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><input type="checkbox"/> N-E<br><input type="checkbox"/> S-W                                                       | <input checked="" type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <input 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                                                                                                                                                                                                                                                                               | 1.82                                                                                                                                                                                                                                                                             | 0.18                                                                                                                                                                                                                          | 0.08  |          |
| 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 checked="" 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 checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |        | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |          | clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                  |
| Thickness                                                                                                                                                        |        | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                   |          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                    |                  |
| Inclusions                                                                                                                                                       |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    |                  |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                | stones | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | iron pan | manganese                                                                                                                                                                                                                                                                                                                          | charcoal         |
|                                                                                                                                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | plant remains*   |
|                                                                                                                                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | wood             |
|                                                                                                                                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | marine shell     |
|                                                                                                                                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | bone*            |
|                                                                                                                                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | pot              |
|                                                                                                                                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | fired clay / CBM |
|                                                                                                                                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | CTP              |
|                                                                                                                                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | mortar/plaster   |
|                                                                                                                                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | leather/textile  |
|                                                                                                                                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | glass            |
|                                                                                                                                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | metal            |
|                                                                                                                                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | industrial waste |
|                                                                                                                                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | lithics          |
|                                                                                                                                                                  |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    | coarse stone     |
| frequency                                                                                                                                                        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    |                  |
| bulk find                                                                                                                                                        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |                                                                                                                                                                                                                                                                                                                                    |                  |

topsoil ☐

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 |
|            |           | 1610707                                                                                                   | #23         |
|            |           | 1610709                                                                                                   |             |
| Surveyed:  |           | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |             |
|            |           | D.15248                                                                                                   |             |

## Basic process

construction ☐ use ☐ disuse ☐

Date 29/11/18

Initials LE

Checked by

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

# ADDITIONAL INFORMATION

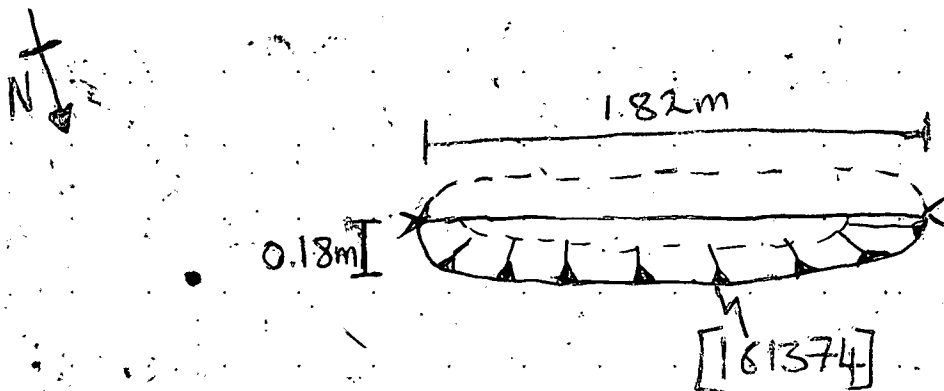
(any further details that may be important for understanding the context, including items marked \* overleaf)

CUT OF PIT ALIGNMENT

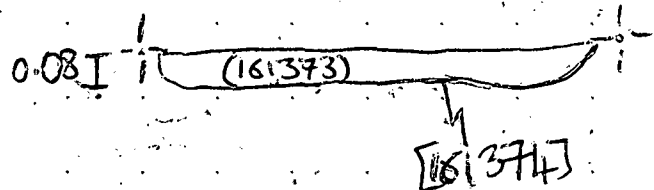
Refer to context 161374

## SKETCHES

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



NW FACING SECTION



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                            |                                           |                                                                                                                        |
|-------------------------|----------------------------|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15 TO BARROW</b> | Context number<br><b>(161375)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>[161372]</b>         | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |                 |
|--|--|-----------------|--|--|-----------------|-----------------|
|  |  | <b>[161379]</b> |  |  | Same as context |                 |
|  |  | <b>(161375)</b> |  |  | Cuts context    |                 |
|  |  | <b>(161376)</b> |  |  | Cut by context  | <b>[161379]</b> |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                    |       |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Shape                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                    |       |          | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |  |
| sub- <input type="checkbox"/> rectangular <input 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"/> |                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                    |       |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |
| 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 checked="" 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 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"/> 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 checked="" type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input checked="" type="checkbox"/> friable |        | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input 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 checked="" 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 checked="" type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| Thickness                                                                                                                                                        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |          |                                                                                                                                                                                                                                                                                                                                                          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| O. 14m                                                                                                                                                           |        | black <input checked="" type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                              |          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| Inclusions                                                                                                                                                       |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |          |                                                                                                                                                                                                                                                                                                                                                          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                | stones | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | iron pan | manganese                                                                                                                                                                                                                                                                                                                                                | charcoal | plant remains*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | wood | marine shell | bone* | pot | fired clay / CBM | CTP | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone |
| frequency                                                                                                                                                        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |          |                                                                                                                                                                                                                                                                                                                                                          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| bulk find                                                                                                                                                        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |          |                                                                                                                                                                                                                                                                                                                                                          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |

### CROSS REFERENCE

|            |           |                                                  |                                                                                                                                          |
|------------|-----------|--------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                        | Drawing nos                                                                                                                              |
|            |           | 1610-710<br>(101-0040)<br>1610-711<br>(101-0041) | 423<br>Surveyed<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 16.249 |

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>19.1.18</b>                                                                                           |
| Initials <b>KK</b>                                                                                            |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

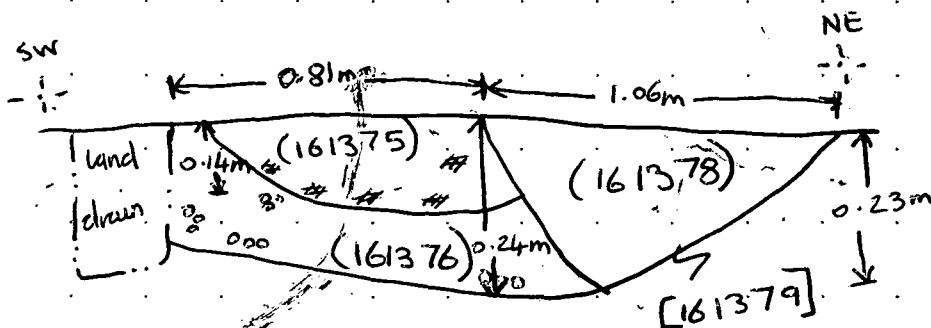
Secondary fill of pit  
contained no finds  
fill is rich in charcoal  
but no evidence of in situ burning

Refer to context (161375)

## SKETCHES

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

### SW Facing Section



Key

# charcoal

oo stones

N.T.S

|                         |                            |                                           |                                                                                                                        |
|-------------------------|----------------------------|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15 TO BARROW</b> | Context number<br><b>(161376)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>[161377]</b>         | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

STRATIGRAPHIC MATRIX

STRATIGRAPHY

|  |  |                 |  |  |                                |
|--|--|-----------------|--|--|--------------------------------|
|  |  | <b>(161375)</b> |  |  | Same as context                |
|  |  | <b>(161376)</b> |  |  | Cuts context                   |
|  |  | <b>[161377]</b> |  |  | Cut by context <b>[161379]</b> |

CUT

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

DESCRIPTION

INTERPRETATION

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

FILL/DEPOSIT

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

DESCRIPTION

INTERPRETATION

|                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Compaction                                                                                                                                                       | Colour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Composition                                                                                                                                                                                                                                                                                                                                              | <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 checked="" 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) |
| <input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input checked="" type="checkbox"/> friable | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown<br>greyish <input checked="" type="checkbox"/> <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> <input type="checkbox"/> red<br>blueish <input type="checkbox"/> <input type="checkbox"/> blue                                                                                                      | clayey <input type="checkbox"/> <input type="checkbox"/> clay<br>silty <input type="checkbox"/> <input checked="" type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Thickness<br><b>0.24m</b>                                                                                                                                        | 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* <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 <b>F</b>                                                                                                                                               | bulk find <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

CROSS REFERENCE

|                        |                       |                                                                                         |                                                                                                                                                                    |
|------------------------|-----------------------|-----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>/</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610710</b><br><b>(101-0040)</b><br><b>1610711</b><br><b>(101-0041)</b> | Drawing nos <b>#23</b><br>Surveyed<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D.16.249</b> |
|------------------------|-----------------------|-----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>29.1.18</b>                                                                                           |
| Initials <b>ICK</b>                                                                                           |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

Primary fill of pit  
contained no fossils  
fill did have many stones  
(small sub angular) at the bottom  
of fill.

Refer to context (161376)

## SKETCHES

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

Please see  
(161375) for sketch  
of section



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                           |                                                                                                                        |
|-------------------------|----------------------------|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15 TO BARROW</b> | Context number<br><b>[161377]</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>[161377]</b>         | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                               |
|--|--|-----------------|--|--|-------------------------------|
|  |  | <b>(161376)</b> |  |  | Same as context               |
|  |  | <b>[161377]</b> |  |  | Cuts context                  |
|  |  | <b>NAT</b>      |  |  | Cut by context <b>[14379]</b> |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                              |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                              |                                 | pit <input checked="" type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input checked="" type="checkbox"/> NW-SE<br>N                                                                                                                                     | <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><b>0.81m</b>                                                                                                                                                                                                                                                                                  | <b>Width</b><br><b>0.80m</b>                                                                                                                                                                                                                             | <b>Depth</b><br><b>0.24m</b> | <b>Diameter</b><br><b>0.86m</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"/><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 checked="" type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b>                                                                                                                                                           | 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

|            |           |                                                                            |                                                                                                                                         |
|------------|-----------|----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                                                  | Drawing nos <b>#23</b>                                                                                                                  |
| /          | /         | <b>1610710</b><br><b>(101-0040)</b><br><b>1610711</b><br><b>(101-0041)</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16249</b> |

## Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>29.1.18</b>                                                                                                      |
| Initials <b>KK</b>                                                                                                       |
| Checked by                                                                                                               |

# ADDITIONAL INFORMATION

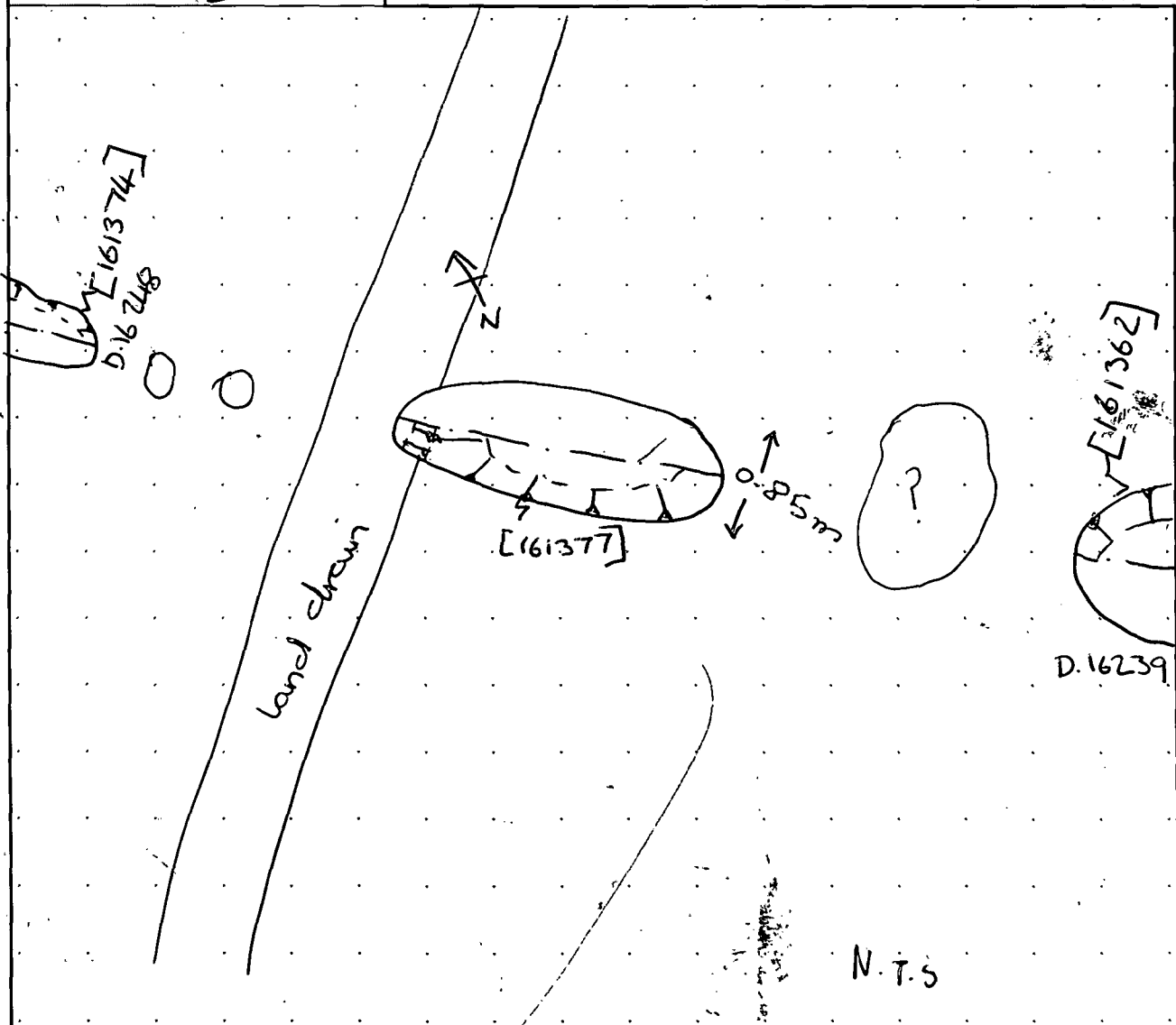
(any further details that may be important for understanding the context, including items marked \*overleaf)

main cut of pit  
within pit alignment  
2 fills (161375) + (161376) contained  
no finds  
possible recut [161379] can be  
seen in section  
however it is highly possible  
said feature is a tree throw.

Refer to context [161377]

## SKETCHES

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



## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (+)      |  |  | Same as context |
|  |  | (161378) |  |  | Cuts context    |
|  |  | [161379] |  |  | 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="radio"/> 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>                                                                                                                                                                                                                                                                            | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |
| 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"/>                                      |               |                                                                                                                                                                                                                                                                               |              |                 |

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

# INTERPRETATION

| Compaction                                                        |                                             | Colour                                                                                                                                                                                                                |                                                                                                                                                                                                                             | Composition                                                                                                                                                               |                                                                                                                                                                    |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input 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"/> silty <input type="checkbox"/> sandy <input checked="" type="checkbox"/> gravelly <input type="checkbox"/> peaty <input type="checkbox"/> | <input type="checkbox"/> clay <input checked="" type="checkbox"/> silt <input type="checkbox"/> sand <input type="checkbox"/> gravel <input type="checkbox"/> peat |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    | <input checked="" type="checkbox"/> friable | brownish <input type="checkbox"/> greyish <input type="checkbox"/> orangeish <input type="checkbox"/> yellowish <input type="checkbox"/> reddish <input checked="" type="checkbox"/> blueish <input type="checkbox"/> | <input checked="" type="checkbox"/> brown <input type="checkbox"/> grey <input type="checkbox"/> orange <input type="checkbox"/> yellow <input type="checkbox"/> red <input type="checkbox"/> blue <input type="checkbox"/> |                                                                                                                                                                           |                                                                                                                                                                    |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                             | other* <input type="checkbox"/>                                                                                                                                                                                       |                                                                                                                                                                                                                             |                                                                                                                                                                           |                                                                                                                                                                    |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.23m                                                             |                                             | 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 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"/> |

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 #23                                                                                                                   | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|------------|-----------|----------------------|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| /          | /         | 1610 710<br>1610 711 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 16249 | Date 29.1.18<br>Initials KK<br>Checked by                                                                     |

# ADDITIONAL INFORMATION

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

Single fill of possible  
recut [161379]

fill contained no finds

occasional small sub angled  
stones.

Refer to context (161378)

## SKETCHES

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

Please see  
(161375) fill sheet  
for sketch of section

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                           |                                                                                                                        |
|-------------------------|----------------------------|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA16 TO BARROW</b> | Context number<br><b>[161379]</b>                                                                                      |
| ECB#                    | Subgroup                   | Parent context<br><b>[161379]</b>         | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                              |
|--|--|-----------------|--|--|------------------------------|
|  |  | <b>(161378)</b> |  |  | Same as context              |
|  |  | <b>[161379]</b> |  |  | Cuts context <b>[161377]</b> |
|  |  | <b>(161375)</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 checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                                |                              |                                                                                                                                                                                                                                                          | pit <input checked="" type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                                 |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <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 type="checkbox"/> vertical<br>} <input type="checkbox"/> steep<br>} <input type="checkbox"/> moderate sloping<br>} <input checked="" type="checkbox"/> gentle<br>} <input type="checkbox"/> stepped<br>} <input type="checkbox"/> undercutting<br>} <input type="checkbox"/> complex* |                              | <b>Base</b><br>I <input type="checkbox"/> flat<br>C <input checked="" 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><br><b>1.06m</b>                                                                                                                                                                                                                                                                                  | <b>Width</b><br><b>0.85m</b> | <b>Depth</b><br><b>0.23m</b>                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Diameter</b><br><b>0.95m</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 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 type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |  | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |  | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent<br>stones* <input type="checkbox"/> chalk <input type="checkbox"/> iron ore <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"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <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"/> <input type="checkbox"/>                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|                        |                       |                                               |                                                                                                                                                                        |
|------------------------|-----------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>1</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610710</b><br><b>1610711</b> | Drawing nos<br><b># 23</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16 249</b> |
|------------------------|-----------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>24.1.18</b>                                                                                                      |
| Initials <b>IK</b>                                                                                                       |
| Checked by                                                                                                               |

# ADDITIONAL INFORMATION

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

possible recut of pit  
or slumping of tree throw  
fill contained no finds  
unable to date

Refer to context

[161379]

## SKETCHES

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

Please see  
[161377] cut sheet  
for sketch of plan



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                                          |                                                                                                                        |
|-------------------------|-----------------------------|------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>SEA 16</b> | Sub-area/Trench<br><b>TEM 5 - Ballon</b> | Context number<br><b>161380</b>                                                                                        |
| ECB#                    | Subgroup                    | Parent context<br><b>[161300]</b>        | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161381</b> |  |  | Same as context |
|  |  | <b>161380</b> |  |  | Cuts context    |
|  |  | <b>160003</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>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 checked="" type="checkbox"/> gentle<br>1 <input type="checkbox"/> stepped<br>1 <input type="checkbox"/> undercutting<br>1 <input type="checkbox"/> complex* |                             | <b>Base</b><br>1 <input type="checkbox"/> flat<br>1 <input checked="" type="checkbox"/> concave<br>1 <input type="checkbox"/> v-shaped<br>1 <input type="checkbox"/> sloping<br>1 <input type="checkbox"/> uneven<br>1 <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          |  | <b>Length</b><br><b>1.26</b>                                                                                                                                                                                                                                                                                   | <b>Width</b><br><b>1.24</b> | <b>Depth</b><br><b>0.21</b>                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Diameter</b><br><b>1.24</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 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 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*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## CROSS REFERENCE

|                        |                       |                                               |                                                                                                                                                                       |
|------------------------|-----------------------|-----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>X</b> | Finds nos<br><b>X</b> | Photo nos<br><b>1610712</b><br><b>1610713</b> | Drawing nos<br><b>#23</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D.16250</b> |
|------------------------|-----------------------|-----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☒ disuse ☐

Date **27-1-2018**

Initials **24**

Checked by

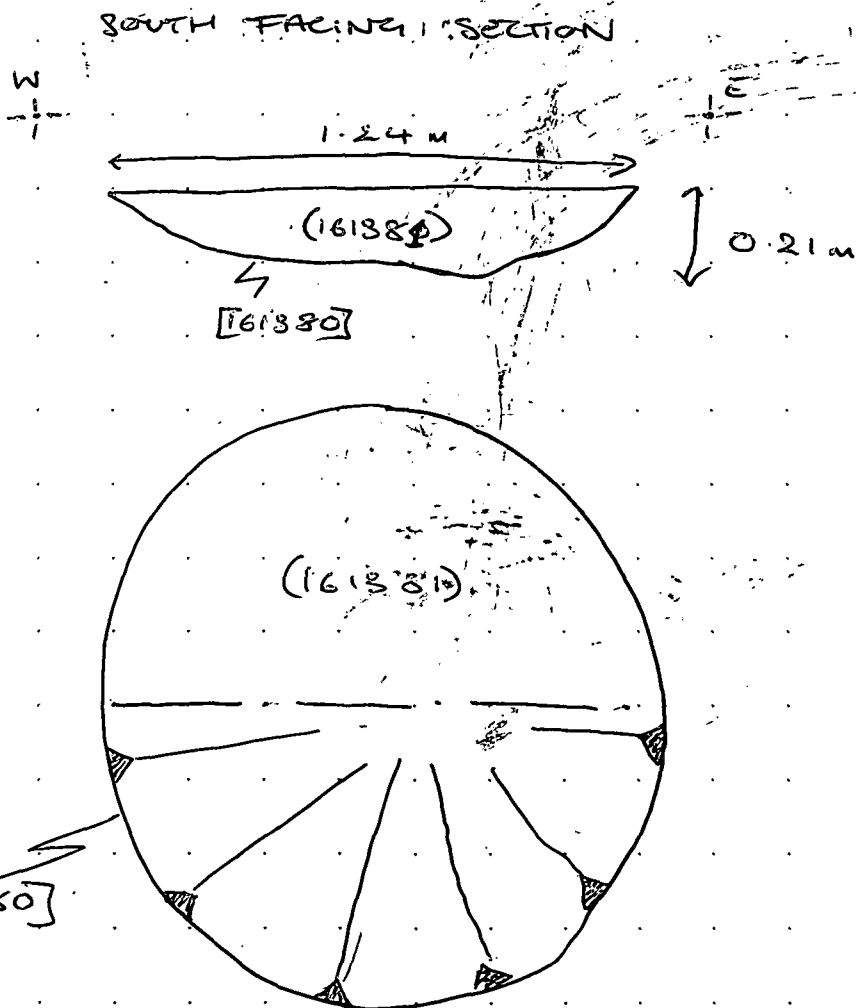


CUT OF SHALLOW PIT. PIT PROBABLY TRUNCATED  
BY MACHINE CAUSING ONLY THE BASE OF  
THE PIT TO BE EXCAVATED.

POT SHERDS FOUND IN FILL (161381)

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>TEA16</b> | Sub-area/trench<br><b>TEA15-BAY</b> | Context number<br><b>161381</b>                                                                                        |
| ECB#                    | Subgroup                   | Parent context<br><b>[161380]</b>   | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  |               |  |  | Same as context |
|  |  | <b>161381</b> |  |  | Cuts context    |
|  |  | <b>161380</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 checked="" type="checkbox"/> NE-SW<br>✓ <input checked="" 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>I <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                                                                                                                                                                                                                                                               | Length                                                                                                                                                                                                                                                                                                | Width                                                                                                                                                                                                                                         | Depth | Diameter |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <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 checked="" 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 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 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>0.21</b>                                                                                                                                                       | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency<br>bulk find <input checked="" type="checkbox"/>                                                                                                                            | 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"/> |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

|                         |                        |                                                |                                                                                                                                                                   |
|-------------------------|------------------------|------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos.<br><b>✓</b> | Finds nos.<br><b>2</b> | Photo nos.<br><b>1610712</b><br><b>1610713</b> | Drawing nos. <b># 23</b><br>Surveyed: <b>D.16280</b><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|-------------------------|------------------------|------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>27/1/18</b>                                                                                           |
| Initials <b>RM</b>                                                                                            |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

Fm of SALAW PIT, NATURAL INFILTRATION WITH POT FOUND IN STAGE.

Refer to context

161380

## 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>TEA16</b> | Sub-area/Trench<br><b>TEA15-BARROW</b> | Context number<br><b>161382</b>                                                                                        |
| ECB #                   | Subgroup                   | Parent context<br><b>161382</b>        | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161383</b> |  |  | Same as context |
|  |  | <b>161382</b> |  |  | Cuts context    |
|  |  | <b>160003</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>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 checked="" 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</b><br>0.65m                                                                                                                                                                                                                                                                                 | <b>Width</b><br>0.47m                                                                                                                                                                                                                                    | <b>Depth</b><br>0.4m | <b>Diameter</b><br>0.47m |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                          |                      |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                          |                      |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

### FILL/DEPOSIT

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

### DESCRIPTION

### INTERPRETATION

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

### CROSS REFERENCE

|                              |                       |                             |                                                                                                                                                               |
|------------------------------|-----------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>1610714</b> | Finds nos<br><b>α</b> | Photo nos<br><b>1610714</b> | Drawing nos <b>#23</b><br>Surveyed: <b>16251</b><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|------------------------------|-----------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☒ use ☐ disuse ☐

Date **30/1/2018**

Initials **RM**

Checked by

# ADDITIONAL INFORMATION

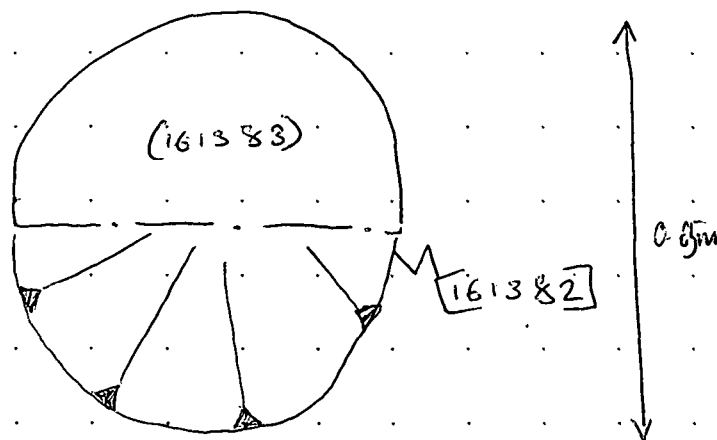
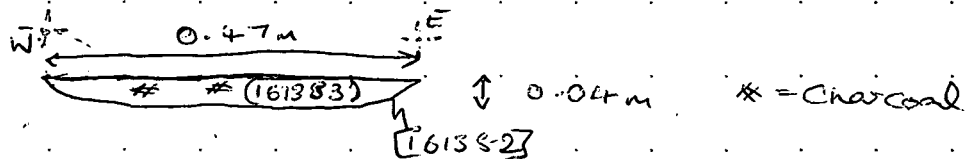
(any further details that may be important for understanding the context, including items marked \* overleaf)

VERY SHALLOW BOTTOM OF A PIT.  
 PROBABLY TRUNCATED BY PLOWING  
 + MACHINE

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>TEA16</b> | Sub-area/Trench<br><b>TEA15 - BARROW</b> | Context number<br><b>161383</b>                                                                                        |
| ECB#                    | Subgroup                   | Parent context<br><b>161382</b>          | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(160002)</b> |  |  | Same as context |
|  |  | <b>161383</b>   |  |  | Cuts context    |
|  |  | <b>161382</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 checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input 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"/> | <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>0.04</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>bulk find                                                                                                                                                                | stones*<br>chalk<br>iron pan<br>manganese<br>charcoal<br>plant remains*<br>wood<br>marine shell<br>bone*<br>pot<br>fired clay / CBM<br>CTP<br>mortar/plaster<br>leather/textile<br>glass<br>metal<br>industrial waste<br>lithics<br>coarse stone                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|                        |                       |                             |                                                                                                                                                                  |
|------------------------|-----------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>X</b> | Finds nos<br><b>X</b> | Photo nos<br><b>1610714</b> | Drawing nos # <b>23</b><br>Surveyed: <b>D.16251</b><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|------------------------|-----------------------|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>30/1/18</b>                                                                                           |
| Initials <b>24</b>                                                                                            |
| Checked by                                                                                                    |

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

FILL OF PIT.

161382

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



## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 160002 |  |  | Same as context |
|  |  | 161384 |  |  | Cuts context    |
|  |  | 161385 |  |  | Cut by context  |

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

~~INTERPRETATION~~

|                                                                                                                                                                                                                                                                                              |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                                                                                                                                                                                                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                                                                                                                                                                                                                                   |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                    |               | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="font-size: 2em; margin-right: 10px;">}</div> <div>sloping</div> </div> |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| <b>Dimensions</b>                                                                                                                                                                                                                                                                            | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Depth</b> | <b>Diameter</b>                                                                                                                                                                                                                   |
| 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"/>                                       |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |              |                                                                                                                                                                                                                                   |

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

## INTERPRETATION

[illegible]

### Basic process

|            |              |                               |                                                                                                                                    |                                                                                                               |
|------------|--------------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos | Findings nos | Photo nos                     | Drawing nos #23                                                                                                                    | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|            |              | 1610715<br>1610716<br>1610718 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D. 16252 | Date 30/1/18<br>Initials HCB<br>Checked by                                                                    |

# ADDITIONAL INFORMATION

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

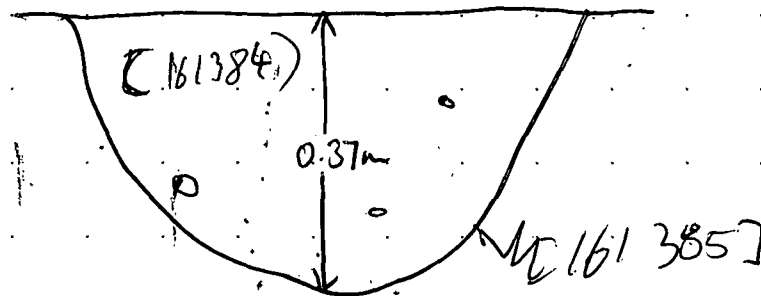
COMPACTED, MID BROWNISH ORANGE, MOTTLED SANDY SILT WITH AN OCC SMALL ROUNDED AND ANGULAR PEBBLE, OCC FLECK OF CBM AND OCC FLECKS OF MANGANESE. ONE VERY SMALL PRAS. OF DAUB?  
Pm or Pit [161385]

Refer to context [161385]

## SKETCHES

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

EAST FACING SECTION



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                               |                             |                                           |                                                                                                                        |
|-------------------------------|-----------------------------|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>AN4 TBA16</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>TEA 15 - BARROW</b> | Context number<br><b>161385</b>                                                                                        |
| ECB#                          | Subgroup                    | Parent context<br><b>[161385]</b>         | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |              |  |                 |
|--|--|---------------|--------------|--|-----------------|
|  |  | <b>161384</b> |              |  | Same as context |
|  |  | <b>161385</b> |              |  | Cuts context    |
|  |  | <b>160003</b> | <b># NAT</b> |  | Cut by context  |

## CUT

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

## DESCRIPTION

|                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |              |          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------|
| Shape                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |              |          |
| 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                                                                                                                                                                                                                          |              |          |
| <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br><input checked="" type="checkbox"/> N                                                                                                           | <input type="checkbox"/> vertical<br><input checked="" type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |              |          |
| Dimensions                                                                                                                                                                                                                                                                                         | Length                                                                                                                                                                                                                                                                   | Width                                                                                                                                                                                                                         | Depth        | Diameter |
| in metres                                                                                                                                                                                                                                                                                          | <b>0.90m SE-NW</b>                                                                                                                                                                                                                                                       | <b>0.62m NE-SW</b>                                                                                                                                                                                                            | <b>0.37m</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"/>                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |              |          |

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <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) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## FILL/DEPOSIT

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

## DESCRIPTION

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

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <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 # 23                                                                                                                          |
|            |           | <b>160715</b><br><b>160716</b><br><b>160718</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. 16252</b> |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>30/1/18</b>                                                                                           |
| Initials <b>HLB</b>                                                                                           |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION:

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

STEEP SIDED, SUBCIRCULAR CUT WITH CONCAVE BASE:

HALF SECTIONED.

~~DOES NOT INDICATE ITS USE~~

~~TRUNCATED BASE~~

TRUNCATED BASE OF A PIT? FILL DOES NOT INDICATE ITS USE

1

2

3

4

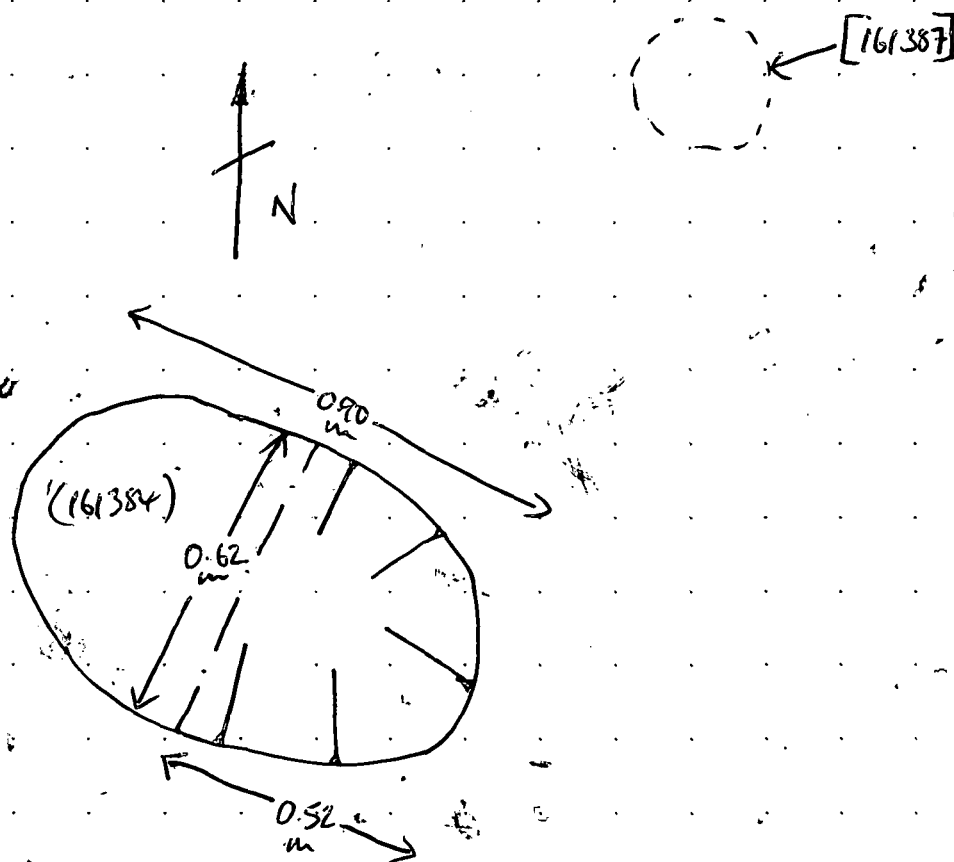
5

6

Refer to context (161384)

## SKETCHES

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



## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 160002 |  |  | Same as context |
|  |  | 161386 |  |  | Cuts context    |
|  |  | 161387 |  |  | Cut by context  |

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

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                          |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------|--|--|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                   | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |  |                                                          |  |  |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                    |  | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="font-size: 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"/>                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | <input style="width: 100px; height: 20px;" type="text"/> |  |  |

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

## INTERPRETATION

| Compaction                                                        |                                             | Colour                                                                                                                                |                          | Composition                                                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|---------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input type="checkbox"/> moderately compact | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> |                          | clayey <input type="checkbox"/> <input type="checkbox"/> clay           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> friable            | brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown                                                           |                          | silty <input type="checkbox"/> <input checked="" type="checkbox"/> silt |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | greyish <input checked="" type="checkbox"/> <input type="checkbox"/> grey                                                             |                          | sandy <input 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                                                         |                                             |                                                                                                                                       |                          |                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.06m                                                             |                                             | 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                                           |                                                                                                                                       |                          |                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 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) ☐

### Basic process

| Sample nos | Finds nos | Photo nos | Drawing nos # 23                                                                                                                   |
|------------|-----------|-----------|------------------------------------------------------------------------------------------------------------------------------------|
| X          | 2         | 1610717   | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D. 16253 |

construction ☐ use ☐ disuse ☒

Date: 30/1/18

Initials: VCB

Checked by:

# ADDITIONAL INFORMATION

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

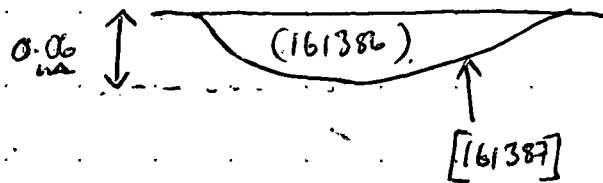
MODERATELY COMPACTED, MID GREYISH BROWN SANDY SILT  
WITH AN OCC. SMALL PEBBLE; STERILE, NO FINDS.

Refer to context

[161387]

## SKETCHES

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





# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                                |                             |                                            |                                                                                                                        |
|--------------------------------|-----------------------------|--------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 TBA 16</b> | Area/Field<br><b>TBA 16</b> | Sub-area/Trench<br><b>TBA 15 - Backrow</b> | Context number<br><b>161387</b>                                                                                        |
| ECB #                          | Subgroup                    | Parent context<br><b>C161387</b>           | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |             |  |                 |
|--|--|---------------|-------------|--|-----------------|
|  |  | <b>161386</b> |             |  | Same as context |
|  |  | <b>161387</b> |             |  | Cuts context    |
|  |  | <b>161003</b> | <b>FNAT</b> |  | Cut by context  |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                              |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                              |                                 | <input type="checkbox"/> pit<br><input checked="" type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br>N<br>                                                                                                                                         | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input checked="" type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input 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* |                              |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br>                                                                                                                                                                                                                                                                        | <b>Width</b><br>                                                                                                                                                                                                                             | <b>Depth</b><br><b>0.06m</b> | <b>Diameter</b><br><b>0.28m</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"/><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 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <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> </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 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 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>Bulk find</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

## CROSS REFERENCE

|                                                                                                                                           |                        |                             |                             |
|-------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-----------------------------|-----------------------------|
| Sample nos.<br>                                                                                                                           | Finds nos.<br><b>2</b> | Photo nos.<br><b>161077</b> | Drawing nos.<br><b># 23</b> |
| Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. 16253</b> |                        |                             |                             |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>30/1/18</b>                                                                                           |
| Initials <b>HCB</b>                                                                                           |
| Checked by                                                                                                    |



# ADDITIONAL INFORMATION

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

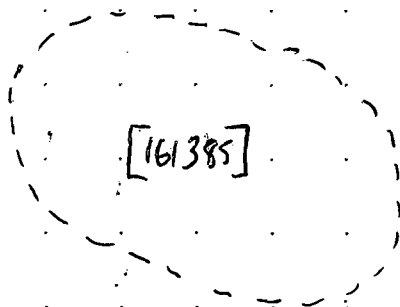
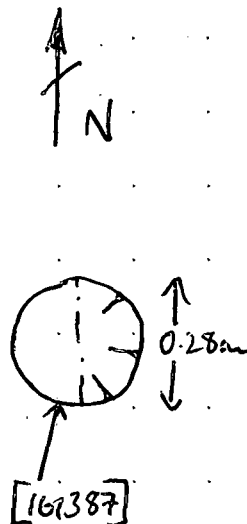
CIRCULAR SHAPED CUT WITH GENTLY SLOPING SIDES  
AND FLAT BASE.  
POSSIBLY TRUNCATED. ~~REMAINS~~ REMAINS OF A POST HOLE

Refer to context

(161386)

## SKETCHES

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



## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 161389 |  |  | Same as context |
|  |  | 161388 |  |  | Cuts context    |
|  |  | 160003 |  |  | 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 checked="" type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                |                                                                                                                                                                                                                                                                                          |                       |                                                                                                                                                                                                                                              |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input checked="" type="checkbox"/> NW-SE<br><br>                                  |                                | <b>Sides</b><br><input type="checkbox"/> vertical<br><input checked="" type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |                       | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br>2m DITCH SLOT | <b>Width</b><br>1.1m                                                                                                                                                                                                                                                                     | <b>Depth</b><br>0.34m | <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 checked="" type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                      |                                |                                                                                                                                                                                                                                                                                          |                       |                                                                                                                                                                                                                                              |

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

## INTERPRETATION

| Compaction                                                        |                                                                                                                            | Colour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                   | Composition                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|---------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> | <div>                     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"/> </div> | clayey <input type="checkbox"/>   | <input type="checkbox"/> clay   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> moderately compact                       |                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | silty <input type="checkbox"/>    | <input type="checkbox"/> silt   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    |                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | sandy <input type="checkbox"/>    | <input type="checkbox"/> sand   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> friable                                  |                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | gravelly <input type="checkbox"/> | <input type="checkbox"/> gravel |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | peaty <input type="checkbox"/>    | <input type="checkbox"/> peat   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                                                                                                            | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                   | other* <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 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                      | fred 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

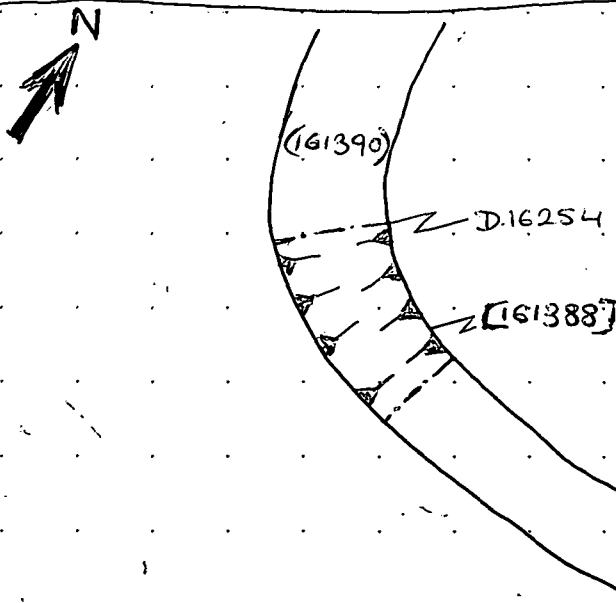
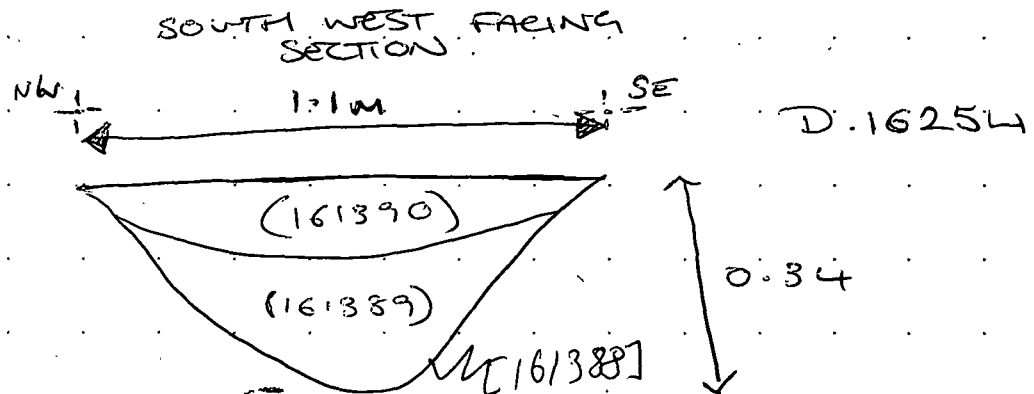
|            |           |                                  |                                                                                                                                        |                                                                                                                       |
|------------|-----------|----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                        | Drawing nos <i># 23</i>                                                                                                                | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> <i>discuss</i> <input type="checkbox"/> |
| <i>α</i>   | <i>χ</i>  | <i>1610720</i><br><i>1610724</i> | Surveyed: <i>D. 16254</i><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> | Date: <i>30/1/2012</i><br>Initials: <i>RM</i><br>Checked by:                                                          |

DITCH SLOT OF LARGE ENCLOSURE DITCH.  
CONTAINS TWO FILLS

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>TEA16</b> | Sub-area/Trench<br><b>TEA15 - BARROW</b> | Context number<br><b>161389</b>                                                                                        |
| ECB #                   | Subgroup                   | Parent context<br><b>161388</b>          | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161390</b> |  |  | Same as context |
|  |  | <b>161389</b> |  |  | Cuts context    |
|  |  | <b>161388</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><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 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                                                                                                                                                                                                                                                               | <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 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"/> | <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><b>0.274</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"/> 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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |

## Roots

## CROSS REFERENCE

|                        |                       |                                               |                                                                                                                                                                  |
|------------------------|-----------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>2</b> | Finds nos<br><b>2</b> | Photo nos<br><b>1610720</b><br><b>1610721</b> | Drawing nos <b># 23</b><br>Surveyed: <b>D.16254</b><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|------------------------|-----------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>30/1/2018</b>                                                                                                    |
| Initials <b>RM</b>                                                                                                       |
| Checked by                                                                                                               |

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

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

FILL OF DITCH

(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>TEA16</b> | Sub-area/Trench<br><b>TEA15-BARROW</b> | Context number<br><b>161390</b>                                                                                        |
| ECB#                    | Subgroup                   | Parent context<br><b>161388</b>        | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                  |  |  |                 |
|--|--|------------------|--|--|-----------------|
|  |  | <b>(1610002)</b> |  |  | Same as context |
|  |  | <b>161390</b>    |  |  | Cuts context    |
|  |  | <b>161389</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<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 type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input checked="" type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | <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>0.16m</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"/> 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 checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|                        |                           |                                               |                                                                                                                                                                    |
|------------------------|---------------------------|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>2</b> | Finds nos<br><b>16309</b> | Photo nos<br><b>1610720</b><br><b>1610721</b> | Drawing nos<br><b>423</b><br>Surveyed: <b>0.16384</b><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|------------------------|---------------------------|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>30/1/18</b>                                                                                           |
| Initials <b>RH</b>                                                                                            |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

UPPER - FILL OF ENCLOSURE DITCH.

Refer to context 161388

## SKETCHES

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



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                          |                             |                                            |                                                                                                                        |
|--------------------------|-----------------------------|--------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>AIL4</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>TEA 15 TO BARROW</b> | Context number<br><b>(161391)</b>                                                                                      |
| ECB #                    | Subgroup                    | Parent context<br><b>[161392]</b>          | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                                |
|--|--|-----------------|--|--|--------------------------------|
|  |  | <b>[161396]</b> |  |  | Same as context                |
|  |  | <b>(161391)</b> |  |  | Cuts context                   |
|  |  | <b>[161392]</b> |  |  | Cut by context <b>[161396]</b> |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>H <input type="checkbox"/> E-W<br>V <input type="checkbox"/> NE-SW<br>W <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                                            | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>\ <input type="checkbox"/> steep<br>/ <input type="checkbox"/> moderate<br>~ <input type="checkbox"/> gentle<br>~ <input type="checkbox"/> stepped<br>Z <input type="checkbox"/> undercutting<br>~ <input type="checkbox"/> complex* | <b>Base</b><br>— <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input 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 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 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 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"/>                                                                                                                                                                                                                                                                                                        | <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> 0.34<br><b>0.27m</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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |                            |                                                                                                                                          |
|------------|-----------|----------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                  | Drawing nos <b>#2A</b>                                                                                                                   |
|            |           | 610726<br>610727<br>610728 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D.16257</b> |

## Basic process

construction ☐ use ☒ disuse ☒

Date **31.1.18**

Initials **KK**

Checked by

# ADDITIONAL INFORMATION

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

Single fill of feature  
appears to be natural  
molten fill, contained much  
manganese  
no pinch, backfilled with natural

Refer to context (161391)

## SKETCHES

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

Please see (161395)  
Full sheet for sketch of  
section

## STRATIGRAPHY

|  |  |          |  |  |                                    |
|--|--|----------|--|--|------------------------------------|
|  |  | (16139D) |  |  | Same as context                    |
|  |  | [161392] |  |  | Cuts context                       |
|  |  | NAT      |  |  | Cut by context <del>(161392)</del> |

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

### DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                          |                       |                                                                                                                                                                                                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                          |                       |                                                                                                                                                                                                                                              |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input checked="" type="checkbox"/> NW-SE                                                               |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input checked="" type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |                       | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     |  | <b>Length</b><br>1.92m                                                                                                                                                                                                                                                                   | <b>Width</b><br>2.18m | <b>Depth</b> 0.34<br>0.27m                                                                                                                                                                                                                   |
|                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                          |                       | <b>Diameter</b><br>Approx. 2m                                                                                                                                                                                                                |
| <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) ☒

**Tree throw**

**FILL/DEPOSIT**

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

## DESCRIPTION

## INTERPRETATION

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

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 #24                                                                                                                    |
|------------|-----------|----------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| /          | /         | 610726<br>610727<br>610728 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D. 16257 |

## Basic process

construction ☒ use ☐ disuse ☐

Date 31.1.18

Initials K.K.

Checked by

# ADDITIONAL INFORMATION

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

feature contained a single  
fill (161392)  
possible tree bowl  
feature contained no finds

Refer to context [161392]

## SKETCHES

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

Please see [161396]  
cut sheet for sketch  
of plan.

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                          |                              |                                              |                                                                                                                        |
|--------------------------|------------------------------|----------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TE A 16</b> | Sub-area/Trench<br><b>TEA 15 TO BARR 3 W</b> | Context number<br><b>(161393)</b>                                                                                      |
| ECB #                    | Subgroup                     | Parent context<br><b>(161394)</b>            | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>+</b>        |  |  | Same as context |
|  |  | <b>(161393)</b> |  |  | Cuts context    |
|  |  | <b>(161394)</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="text"/> |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br>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 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"/> <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 type="checkbox"/> clay<br>silty <input type="checkbox"/> <input checked="" type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat | 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="text"/> |
| <b>Thickness</b><br><b>0-30 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<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><b>/</b> | Finds nos<br><b>/</b> | Photo nos<br><b>610 729</b><br><b>610 730</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16257</b> |
|------------------------|-----------------------|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>31.1.18</b>                                                                                           |
| Initials <b>KK</b>                                                                                            |
| Checked by <input type="text"/>                                                                               |

# ADDITIONAL INFORMATION

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

FILL OF TREE BOLE

Refer to context

161394

## SKETCHES

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



## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161393) |  |  | Same as context |
|  |  | [161394] |  |  | Cuts context    |
|  |  | (161395) |  |  | Cut by context  |

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                             |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                |                                                                                                                                                                                                                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Shape<br>sub- <input checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                |                                                                                                                                                                                                                                       |
| Orientation<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                                                               |                 | 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="margin-left: 10px;">           sloping         </div> </div> |                | Base<br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input checked="" type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| Dimensions<br>in metres                                                                                                                                                                                                                                                                                     | Length<br>1.65m | Width<br>2.18 / 2.18m                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Depth<br>0.30m | Diameter<br>.                                                                                                                                                                                                                         |
| Shape result of (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input checked="" type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                  |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                |                                                                                                                                                                                                                                       |

## FILL/DEPOSIT

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

### DESCRIPTION

## INTERPRETATION

[illegible]

### CROSS REFERENCE

| Sample nos | Finds nos | Photo nos        | Drawing nos # 25                                                                                                                  |
|------------|-----------|------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| /          | /         | 610724<br>610730 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D.16257 |

## Basic process

construction use disuse

Date 31.1.18

Initials IK

Checked by



# ADDITIONAL INFORMATION

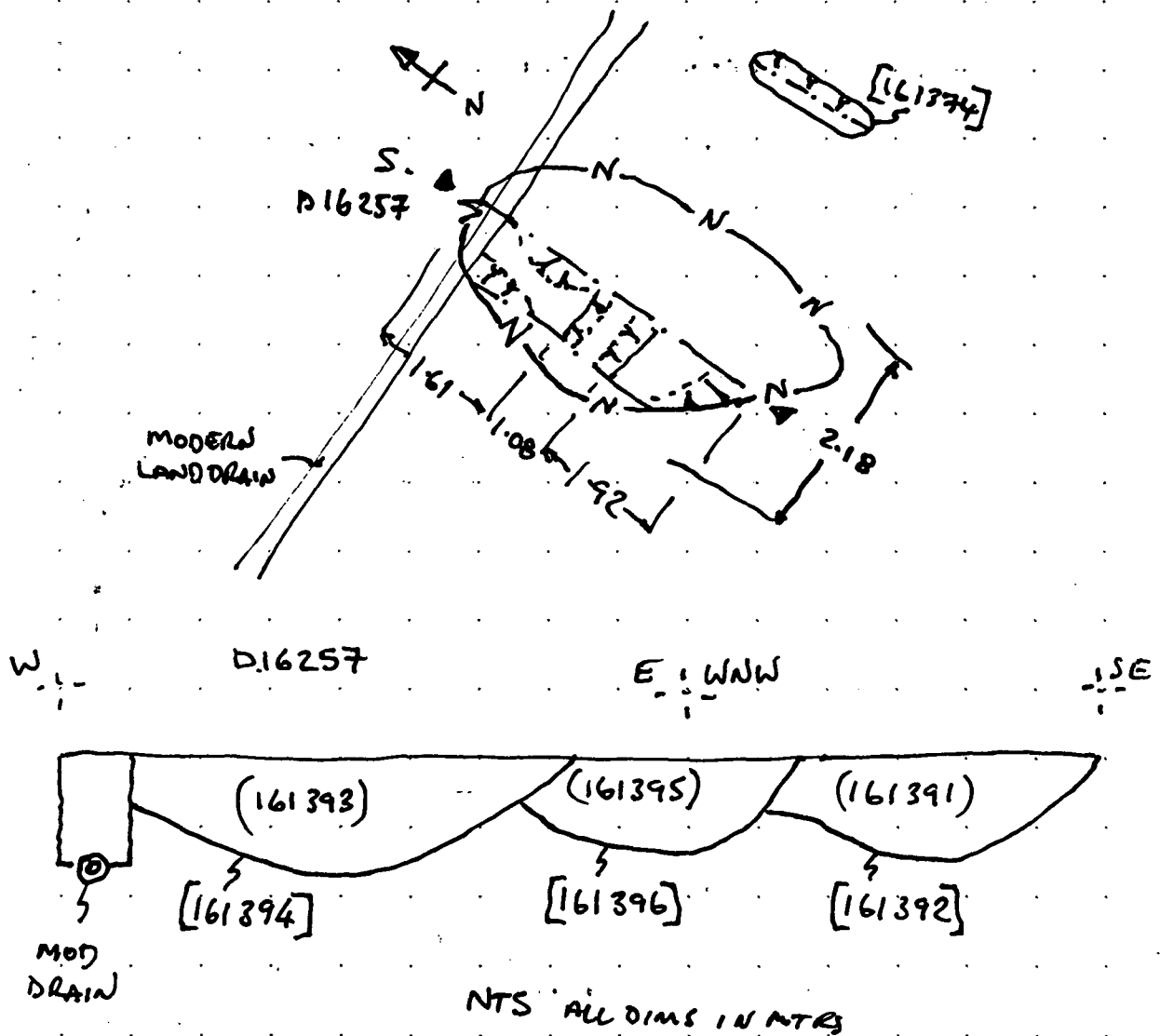
(any further details that may be important for understanding the context, including items marked \* overleaf)

CUT FOR TREE BOLE/THROW TRUNCATED TREE THROWN [161396]  
+ (161395) FILL.

Refer to context

## SKETCHES

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



## STRATIGRAPHY

|  |  |          |  |  |                         |
|--|--|----------|--|--|-------------------------|
|  |  | [161394] |  |  | Same as context         |
|  |  | (161395) |  |  | Cuts context [161392]   |
|  |  | [161396] |  |  | Cut by context [161394] |

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

## INTERPRETATION

| Shape                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------|
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |          |
| Orientation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Sides                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |       | Base     |
|  <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE<br><br> 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 | Diameter |
| in metres *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |          |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |          |
| design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |          |

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

## INTERPRETATION

| Compaction                                                        |                                                        | Colour                                                                                                                                |                                     | Composition                               |                                          |
|-------------------------------------------------------------------|--------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------------|------------------------------------------|
| <input type="checkbox"/> compact                                  | <input checked="" type="checkbox"/> moderately compact | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> |                                     | clayey <input type="checkbox"/>           | <input type="checkbox"/> clay            |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> friable                       | brownish <input checked="" type="checkbox"/> <input type="checkbox"/> brown                                                           |                                     | silty <input checked="" type="checkbox"/> | <input type="checkbox"/> silt            |
|                                                                   |                                                        | greyish <input checked="" type="checkbox"/> <input type="checkbox"/> grey                                                             |                                     | sandy <input type="checkbox"/>            | <input checked="" 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                                                         |                                                        |                                                                                                                                       |                                     | other* <input type="checkbox"/>           |                                          |
| 0.31m                                                             |                                                        | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                         |                                     |                                           |                                          |
| Inclusions                                                        |                                                        |                                                                                                                                       |                                     |                                           |                                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                                | chalk                                                                                                                                 | iron pan                            | manganese                                 | charcoal                                 |
|                                                                   |                                                        |                                                                                                                                       |                                     |                                           | plant remains*                           |
|                                                                   |                                                        |                                                                                                                                       |                                     |                                           | wood                                     |
|                                                                   |                                                        |                                                                                                                                       |                                     |                                           | marine shell                             |
|                                                                   |                                                        |                                                                                                                                       |                                     |                                           | bone*                                    |
|                                                                   |                                                        |                                                                                                                                       |                                     |                                           | pot                                      |
|                                                                   |                                                        |                                                                                                                                       |                                     |                                           | fired clay / CBM                         |
|                                                                   |                                                        |                                                                                                                                       |                                     |                                           | CTP                                      |
|                                                                   |                                                        |                                                                                                                                       |                                     |                                           | mortar/plaster                           |
|                                                                   |                                                        |                                                                                                                                       |                                     |                                           | leather/textile                          |
|                                                                   |                                                        |                                                                                                                                       |                                     |                                           | glass                                    |
|                                                                   |                                                        |                                                                                                                                       |                                     |                                           | metal                                    |
|                                                                   |                                                        |                                                                                                                                       |                                     |                                           | industrial waste                         |
|                                                                   |                                                        |                                                                                                                                       |                                     |                                           | lithics                                  |
|                                                                   |                                                        |                                                                                                                                       |                                     |                                           | coarse stone                             |
| frequency                                                         | M                                                      |                                                                                                                                       | O                                   |                                           |                                          |
| bulk find                                                         | <input type="checkbox"/>                               | <input type="checkbox"/>                                                                                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>                  | <input type="checkbox"/>                 |

### Basic process

|            |           |                  |                                                                                                                                    |                                                                                                               |
|------------|-----------|------------------|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos        | Drawing nos # 24                                                                                                                   | construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| X          | X         | 610729<br>610730 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 16 257 | Date: 31.1.18<br>Initials: iek<br>Checked by: [Signature]                                                     |

# ADDITIONAL INFORMATION

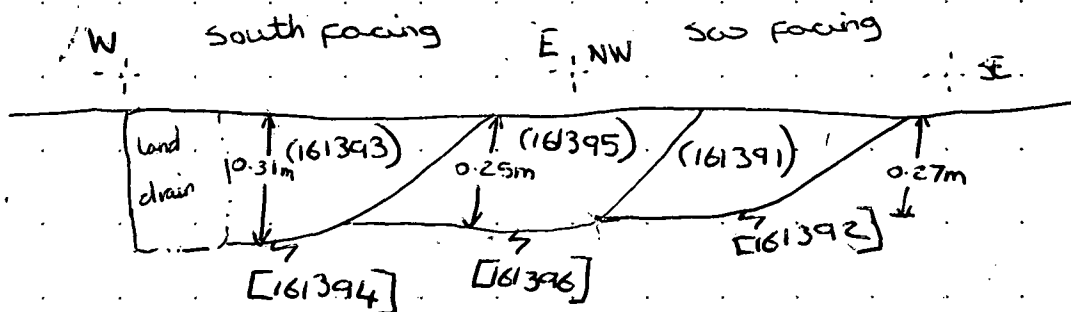
(any further details that may be important for understanding the context, including items marked \* overleaf)

fill contained no finds  
unable to date.  
fill contained less disturbance  
than what is seen in intercutting  
features.

Refer to context (161395)

## SKETCHES

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



N.T.S

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                                           |                                                                                                                        |
|-------------------------|-----------------------------|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>TEA 15 TO BARON</b> | Context number<br><b>[161396]</b>                                                                                      |
| ECB#                    | Subgroup                    | Parent context<br><b>[161396]</b>         | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |                 |
|--|--|-----------------|--|--|-----------------|-----------------|
|  |  | <b>(161395)</b> |  |  | Same as context |                 |
|  |  | <b>[161396]</b> |  |  | Cuts context    | <b>[161392]</b> |
|  |  | <b>(161391)</b> |  |  | Cut by context  | <b>[161394]</b> |

## CUT

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

## DESCRIPTION

|                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |              |                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------|
| Shape                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |              |                   |
| 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                                                                                                                                                                                                                          |              |                   |
| <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 checked="" type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |              |                   |
| Dimensions                                                                                                                                                                                                                                                                                         | Length                                                                                                                                                                                                                                                                   | Width                                                                                                                                                                                                                         | Depth        | Diameter          |
| in metres                                                                                                                                                                                                                                                                                          | <b>0.251.08m</b>                                                                                                                                                                                                                                                         | <b>2.18m</b>                                                                                                                                                                                                                  | <b>0.25m</b> | <b>Approx. 2m</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"/>                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |              |                   |

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <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 checked="" type="checkbox"/> other cut (describe below) |
| <b>Tree track</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |

## FILL/DEPOSIT

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

## DESCRIPTION

|                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 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 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<br>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                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                       |

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <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                                                                                                                                             |
|            |           | <b>610729</b><br><b>610730</b> | <b>104</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. 16257</b> |

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>31.1.16</b>                                                                                |
| Initials <b>KK</b>                                                                                 |
| Checked by                                                                                         |

# ADDITIONAL INFORMATION

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

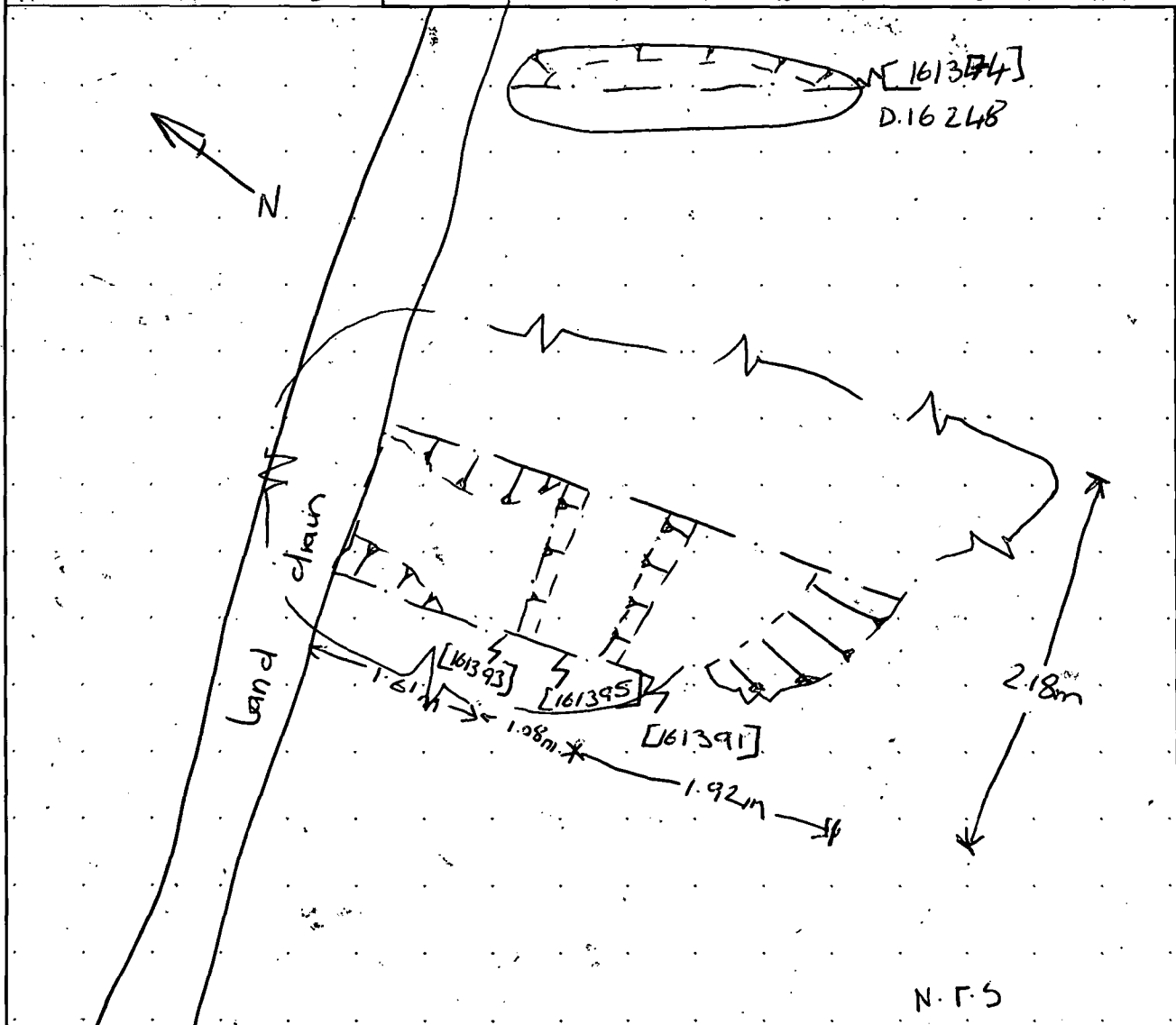
cut of feature, possible tree  
throw

feature is both cut by [161394]  
and cuts [161391]  
possible all features are  
intercutting tree throws

Refer to context [161396]

## 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 16</b> | Sub-area/Trench<br><b>TEA 15 - BANK</b> | Context number<br><b>161397</b>                                                                                        |
| ECB#                    | Subgroup                    | Parent context<br><b>161397</b>         | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |               |                   |  |  |                 |
|--|---------------|-------------------|--|--|-----------------|
|  | <b>161399</b> | <del>160002</del> |  |  | Same as context |
|  |               | <b>161397</b>     |  |  | Cuts context    |
|  | <b>160003</b> | <del>161399</del> |  |  | 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 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>I <input type="checkbox"/> vertical<br>I <input checked="" type="checkbox"/> steep<br>I <input type="checkbox"/> moderate sloping<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* |                             | <b>Base</b><br>I <input 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>1.96</b>                                                                                                                                                                                                                                                                                   | <b>Width</b><br><b>0.90</b> | <b>Depth</b><br><b>0.41</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><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

|            |                                |                                                    |                                                                                                                                                        |
|------------|--------------------------------|----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos                      | Photo nos                                          | Drawing nos                                                                                                                                            |
|            | <b>F16307</b><br><b>F16308</b> | <b>1610722</b><br><b>1610723</b><br><b>1610724</b> | <b># 20</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16256</b> |

## Basic process

|                                                  |                              |                                            |
|--------------------------------------------------|------------------------------|--------------------------------------------|
| construction <input checked="" type="checkbox"/> | use <input type="checkbox"/> | disuse <input checked="" type="checkbox"/> |
| Date                                             | <b>31/01/16</b>              |                                            |
| Initials                                         | <b>JH</b>                    |                                            |
| Checked by                                       |                              |                                            |

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

# ADDITIONAL INFORMATION

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

~~Station~~ N-S slot in enclosure ditch. Truncated by a modern land drain NE-SW. Probable bronze age rectangular enclosure ditch

## SKETCHES

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

Refer to context

↑ N

Land drain

20.90 →  
P96  
[161397]



## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 160002 |  |  | Same as context |
|  |  | 161398 |  |  | Cuts context    |
|  |  | 161399 |  |  | Cut by context  |

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

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                               |              |              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                               |              |              |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                    |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              |              |
|                                                                                                                                                                                                                                                                                              |  | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex*                                             |              |              |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                 | <b>Width</b> | <b>Depth</b> |
|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                               |              |              |
| <b>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                                  | <input type="checkbox"/> moderately compact | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> |                          | clayey <input type="checkbox"/>                                             | <input type="checkbox"/> clay       |
| <input checked="" type="checkbox"/> loose                         | <input type="checkbox"/> friable            | brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown                                                           |                          | silty <input type="checkbox"/> <input checked="" type="checkbox"/> silty    | <input type="checkbox"/> sand       |
|                                                                   |                                             | greyish <input checked="" type="checkbox"/> <input type="checkbox"/> grey                                                             |                          | sandy <input checked="" type="checkbox"/> <input type="checkbox"/> gravelly | <input type="checkbox"/> gravel     |
|                                                                   |                                             | orangeish <input type="checkbox"/> <input type="checkbox"/> orange                                                                    |                          | peaty <input type="checkbox"/> <input type="checkbox"/> peat                |                                     |
|                                                                   |                                             | yellowish <input type="checkbox"/> <input type="checkbox"/> yellow                                                                    |                          |                                                                             |                                     |
|                                                                   |                                             | reddish <input type="checkbox"/> <input type="checkbox"/> red                                                                         |                          |                                                                             |                                     |
|                                                                   |                                             | blueish <input type="checkbox"/> <input type="checkbox"/> blue                                                                        |                          |                                                                             |                                     |
| Thickness                                                         |                                             |                                                                                                                                       |                          |                                                                             |                                     |
| 0.25m                                                             |                                             | 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                                   |
| bulk find                                                         | <input type="checkbox"/>                    | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/>                                                    | <input checked="" type="checkbox"/> |

### Basic process

| Sample nos | Findings nos | Photo nos | Drawing nos                                                                                                                      | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|------------|--------------|-----------|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
|            | F16307       | 1610722   | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16256 | Date: 5/10/98                                                                                                 |
|            | F16308       | 1610723   |                                                                                                                                  | Initials: JH                                                                                                  |
|            |              | 1610724   |                                                                                                                                  | Checked by:                                                                                                   |
|            |              |           |                                                                                                                                  |                                                                                                               |

# ADDITIONAL INFORMATION

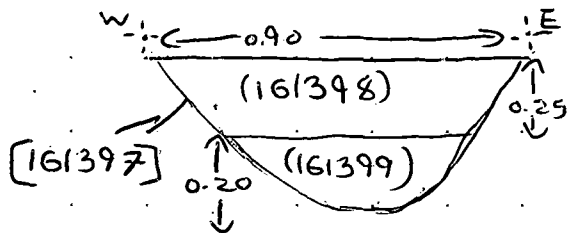
(any further details that may be important for understanding the context, including items marked \* overleaf)

Loose silty fill of enclosure ditch. Occasional disturbance of small roots, occasional charcoal flecks, 2 worked flints found

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 16</b> | Sub-area/Trench<br><b>TEA15-BARR</b> | Context number<br><b>161399</b>                                                                                        |
| ECB #                   | Subgroup                    | Parent context<br><b>161397</b>      | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161398</b> |  |  | Same as context |
|  |  | <b>161399</b> |  |  | Cuts context    |
|  |  | <b>161397</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 (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 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 type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input 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>0.20 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 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"/> GTP <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"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

|             |            |                               |                                                                                                                                          |
|-------------|------------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos. | Finds nos. | Photo nos.                    | Drawing nos.                                                                                                                             |
|             |            | 1610722<br>1610723<br>1610724 | # 20<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16256 |

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date: 4/01/16                                                                                                 |
| Initials: JH                                                                                                  |
| Checked by:                                                                                                   |

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

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

Fill of bottom of enclosure ditch. Occasional charred flecks

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

Refer to context 161396

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                                  |                                       |                          |                                                                                                                        |
|----------------------------------|---------------------------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><del>EA16</del> A14 | Area/Field <del>EA16</del> EA5-BARLOW | Sub-area/Trench          | Context number<br>161400                                                                                               |
| ECB//                            | Subgroup                              | Parent context<br>161400 | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |         |  |  |                 |
|--|--|---------|--|--|-----------------|
|  |  | 1614051 |  |  | Same as context |
|  |  | 161400  |  |  | Cuts context    |
|  |  | 160003  |  |  | 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 checked="" type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                       |                     | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input checked="" type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br>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><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input checked="" type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                       |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br>1-35 m                                                                                                                                                                                                                                                                  | <b>Width</b><br>0-4 m                                                                                                                                                                                                                        | <b>Depth</b><br>0-3 m | <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 checked="" type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                       |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| HEDGES BOWL                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                       |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

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

|                 |                |                                   |                                                                                                                                         |
|-----------------|----------------|-----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>2 | Finds nos<br>2 | Photo nos<br>1610 731<br>1610 732 | Drawing nos # 13<br>Surveyed: 2.16255<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
|-----------------|----------------|-----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                |
|--------------------------------------------------------------------------------------------------------------------------------|
| Basic process<br>construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date<br>31/1/18                                                                                                                |
| Initials<br>RAH                                                                                                                |
| Checked by                                                                                                                     |

# ADDITIONAL INFORMATION

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

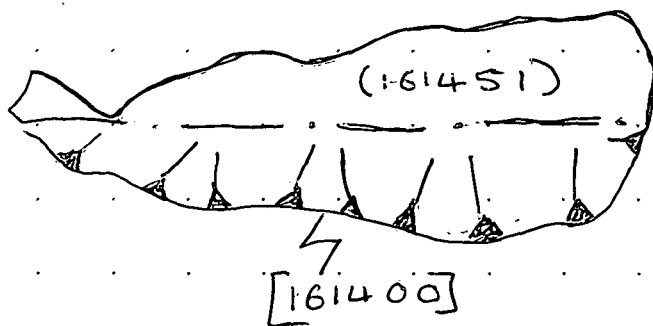
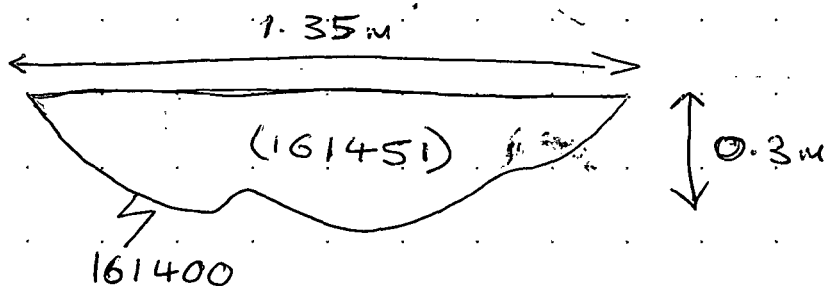
HEDGE BOWL, PART OF A LINE OF  
HEDGE AND TREE BOWLS.

NO FINDS

Refer to context

## SKETCHES

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







|                         |                             |                                 |                                                                                                                        |
|-------------------------|-----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>-</b>     | Context number<br><b>161401</b>                                                                                        |
| ECB #<br><b>-</b>       | Subgroup<br><b>-</b>        | Parent context<br><b>161309</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |               |  |  |                          |
|--|--|---------------|--|--|--------------------------|
|  |  | <b>161322</b> |  |  | Same as context <b>-</b> |
|  |  | <b>161401</b> |  |  | Cuts context <b>-</b>    |
|  |  | <b>161311</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"/> |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 | <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>                                                                                                                                   | <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"/> 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 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 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><b>0.50m</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>bulk find</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input 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**

|                                                                                                                        |                       |                                               |                                              |
|------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------------------------------|----------------------------------------------|
| Sample nos<br><b>-</b>                                                                                                 | Finds nos<br><b>-</b> | Photo nos<br><b>1610619</b><br><b>1610632</b> | Drawing nos<br><b># 21</b><br><b>D 16207</b> |
| Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |                       |                                               |                                              |

**Basic process**

|                                       |                              |                                            |
|---------------------------------------|------------------------------|--------------------------------------------|
| construction <input type="checkbox"/> | use <input type="checkbox"/> | disuse <input checked="" type="checkbox"/> |
| Date                                  | <b>23.01.18</b>              |                                            |
| Initials                              | <b>AM Jh</b>                 |                                            |
| Checked by                            |                              |                                            |



# ADDITIONAL INFORMATION

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

Large silting event infilling the N-S ditch from the West.  
Possibly occurred after ~~some~~ gravel deposit (161325)  
washed into the base of the ditch, at which point  
(161401) took its place ~~during a~~ at a later point.  
The fill carries on past the East Facing section.  
No significant finds or inclusions.

Refer to context

161314  
161306

## SKETCHES

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

## STRATIGRAPHY

|          |        |                 |  |  |                 |                  |
|----------|--------|-----------------|--|--|-----------------|------------------|
|          | 161316 | 161288          |  |  | Same as context | 161312           |
| 161324 = |        | 161402 = 161312 |  |  | Cuts context    | —                |
|          |        |                 |  |  | Cut by context  | 161288<br>161316 |

(if you are using this section score out section **FILL/DÉPOSIT** 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| in metres                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |

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

## INTERPRETATION

| Compaction                                                        |                                                        | Colour                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                         | Composition                                                              |                                                                                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
|-------------------------------------------------------------------|--------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input checked="" type="checkbox"/> moderately compact | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> | brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown<br>greyish <input checked="" type="checkbox"/> <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> <input type="checkbox"/> red<br>blueish <input type="checkbox"/> <input type="checkbox"/> blue | clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay | <input type="checkbox"/> silty<br><input type="checkbox"/> sandy<br><input type="checkbox"/> gravelly<br><input type="checkbox"/> peaty |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
| <input type="checkbox"/> loose                                    |                                                        |                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> silt                                            |                                                                                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
| <input type="checkbox"/> friable                                  |                                                        |                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> sand                                            |                                                                                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
|                                                                   |                                                        |                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> gravel                                          |                                                                                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
| Thickness                                                         |                                                        |                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                         | other* <input type="checkbox"/>                                          |                                                                                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
| 0.38m                                                             |                                                        | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                          |                                                                                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
| Inclusions                                                        |                                                        |                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                          |                                                                                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                                | chalk                                                                                                                                 | iron pan                                                                                                                                                                                                                                                                                                                                                                                                                                | manganese                                                                | charcoal                                                                                                                                | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste                    | lithics                  | coarse stone             |                          |
| frequency                                                         |                                                        |                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                          |                                                                                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
| bulk find                                                         | <input type="checkbox"/>                               | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/>                                                 | <input type="checkbox"/>                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input 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"/> |

### Basic process

|            |           |                         |                                                                                                                                   |                                                                                                               |
|------------|-----------|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos               | Drawing nos # 21                                                                                                                  | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|            | F161304   | 161061a<br>↓<br>1610632 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D 16207 | Date 23.01.19<br>Initials A. A. Jh<br>Checked by                                                              |

# ADDITIONAL INFORMATION

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

Large silting event which puts the ditch out of use.  
 Due to the similarity found between (161312).  
 we concluded that the O are part of the same event.  
 Polished axe-fragment found (see (161312)) along with  
 other evidence of flint-knapping activity.  
 Likely Bronze-Age in date.

Refer to context

161314  
 161306.

## SKETCHES

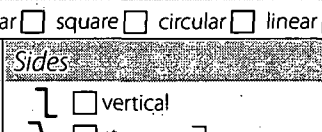
(consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate)

## STRATIGRAPHY:

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (161002) |  |  | Same as context |   |
|  |  | (161403) |  |  | Cuts context    | — |
|  |  | (161404) |  |  | Cut by context  |   |

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

## INTERPRETATION

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

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

## INTERPRETATION

| Compaction                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Colour                                                                                        |                                                              | Composition                                                  |                                                                              |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
|-------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------|--------------------------------------------------------------|------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input type="checkbox"/> light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br><input type="checkbox"/> brownish <input type="checkbox"/> brown<br><input type="checkbox"/> greyish <input checked="" type="checkbox"/> grey<br><input type="checkbox"/> orangeish <input type="checkbox"/> orange<br><input type="checkbox"/> yellowish <input type="checkbox"/> yellow<br><input type="checkbox"/> reddish <input type="checkbox"/> red<br><input type="checkbox"/> bluish <input type="checkbox"/> blue | <input 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 type="checkbox"/> gravelly <input checked="" type="checkbox"/> gravel |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
| <input checked="" type="checkbox"/> moderately compact            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> peaty <input type="checkbox"/> peat                                  |                                                              |                                                              |                                                                              |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
| <input type="checkbox"/> loose                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                               |                                                              |                                                              |                                                                              |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
| <input type="checkbox"/> friable                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                               |                                                              |                                                              |                                                                              |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
|                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                               |                                                              |                                                              |                                                                              |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
| Thickness                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                               |                                                              | other* <input type="checkbox"/>                              |                                                                              |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                                     |                          |                          |                          |
| 1000.54                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 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                                   |                          |                          |                          |                          |                          |                          |                                     | M                        |                          |                          |
| bulk find                                                         | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>                                                                      | <input type="checkbox"/>                                     | <input type="checkbox"/>                                     | <input type="checkbox"/>                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### Basic process

|            |           |               |                                                                                                                                  |                                                                                                               |
|------------|-----------|---------------|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos     | Drawing nos #22                                                                                                                  | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| ✓          | ✓         | 1610633 → 100 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16208 | Date 25/01/18<br>Initials PC/FG/cv<br>Checked by                                                              |

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

FILL OF THE LAST RECENT ~~161404~~ [161404] OF THE RWG-DITCH  
[161420]. THE FILL IS MODERATELY COMPACT, DARK  
GREY COLOUR AND WITH A GRAVELLY CLAY  
COMPOSITION. IN THIS NATURAL INFILLING WE  
FOUND SOME PIECES OF POTTERY (IRON AGE?).

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

161411

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                                    |                                                                                                                        |
|-------------------------|-----------------------------|------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/field<br><b>TEA 16</b> | Sub area/Trench<br><b>—</b>        | Context number<br><b>[1614 04]</b>                                                                                     |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>        | Parent context<br><b>[1614 04]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |           |  |  |                 |           |
|--|--|-----------|--|--|-----------------|-----------|
|  |  | (1614 03) |  |  | Same as context |           |
|  |  | (1614 04) |  |  | Cuts context    | (1613 02) |
|  |  | (1613 02) |  |  | 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 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 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 } 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>U <input checked="" type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input checked="" type="checkbox"/> uneven<br>X <input type="checkbox"/> complex* |                        |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     | <b>Length</b><br>6.00 m                                                                                                                                                                                                                                                                                                  | <b>Width</b><br>3.60 m                                                                                                                                                                                                                                              | <b>Depth</b><br>1.00 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>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| stones* <input type="checkbox"/><br>chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/><br>manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/><br>plant remain* <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<br>/ | Finds nos<br>/ | Photo nos<br>1610633 → 40 | Drawing nos<br>122<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>016208 |
|-----------------|----------------|---------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date 25/01/18                                                                                                 |
| Initials RG/FG/CV                                                                                             |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

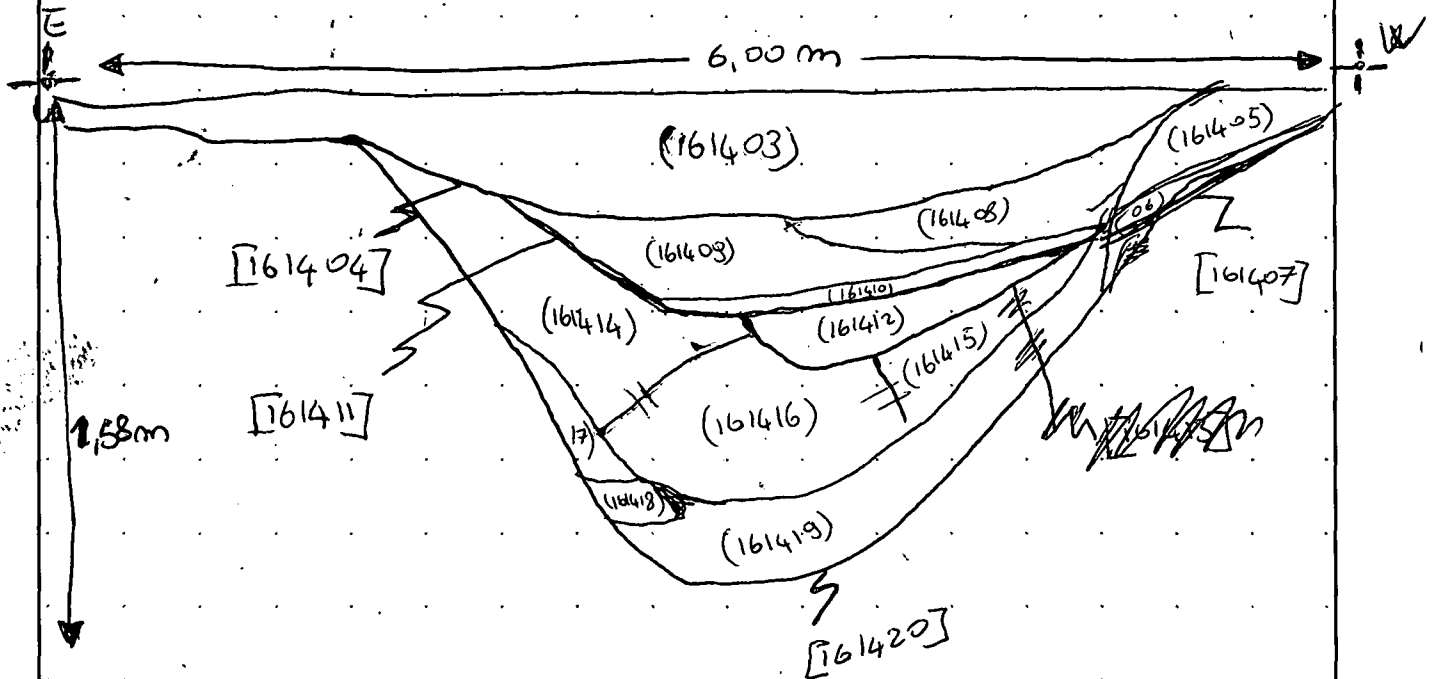
CUT OF THE LAST RECENT OF THE RUG-DITCH [161410], SO  
THE ~~SHAPE~~ SHAPE IS CURVILINEAR. ~~IT~~  
IT HAS MODERATE SLOPING SIDES WITH AN UNEVEN  
BASE. THE WIDTH MAX IS 3,60 m AND THE  
LENGTH IS 6 m. THE DEPTH IS 1,58 m IN THE  
NE FAC SECTION, WHILE IN THE OPPOSITE SECTION THE  
DEPTH IS MORE 940 m.  
IN THIS CUT WE FOUND ONLY ONE FILE.  
THIS CONTEXT CUTS CONTEXT (161002) → SUBSOIL.

Refer to context | MATRIX → 161405  
161420

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

161407/161411

NE FAC SECTION OF DITCH.





# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                          |                             |                                 |                                                                                                                        |
|--------------------------|-----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench                 | Context number<br><b>161405</b>                                                                                        |
| ECB #                    | Subgroup                    | Parent context<br><b>161407</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                              |
|--|--|---------------|--|--|------------------------------|
|  |  | <b>161405</b> |  |  | Same as context              |
|  |  | <b>161405</b> |  |  | Cuts context                 |
|  |  | <b>161406</b> |  |  | Cut by context <b>161407</b> |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                                     |       |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input checked="" type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                     |       |                                                                                                                                                                                                                                               | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE                                                                                                                                          |  | <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                                                                                                                                                                                                                                                                          |  | 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 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 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>0.20                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       | black <input checked="" type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |           | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |           |                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | chalk | iron pan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | manganese | charcoal                                                                                                                                                                                                                                                                                                                                                                       | plant remains* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | wood | marine shell | bone* | pot | fired clay / CBM | CTP | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone |
| frequency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |           |                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |      |              | O     |     |                  |     |                |                 |       |       |                  |         |              |
| 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 |
|            |           | 1610633 +<br>1610634<br>1610635 +<br>1610636                                                                           | 1610638     |
|            |           | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |             |
|            |           | SHEET 22                                                                                                               |             |

### Basic process

|                                       |                                         |                                  |
|---------------------------------------|-----------------------------------------|----------------------------------|
| construction <input type="checkbox"/> | use <input checked="" type="checkbox"/> | discuse <input type="checkbox"/> |
| Date <b>25.01.18</b>                  |                                         |                                  |
| Initials <b>FG</b>                    |                                         |                                  |
| Checked by                            |                                         |                                  |

# ADDITIONAL INFORMATION

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

ALL OF THIS FILL IS VERY SIMILAR TO THE FILLS OF THE CREATION OF THE AREA THIS MAKES US THINK THAT IT IS WHAT REMAINS OF OTHER CREATION CUT FROM THE REWT OF THE DITCH [16411]. IN THIS FILL WE HAVE SOME PIECES OF POTTERY AND BONES BUT THEIR CONSERVATION CONDITION ARE TOO BAD FOR KEEP THEM IN A BAG.

Refer to context

161404  
161420  
161407  
161411

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

## SKETCHES

### SECTION MATRIX

(161002)  
(161403)  
[161404]  
(161408)  
(161409)  
(161400)  
[161411]

~~(161412)~~  
(161414) = (161415) = (161416)  
(161405)  
(161406)  
[161407]

(161417)  
(161418)  
(161419)  
[161420]

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161405) |  |  | Same as context |
|  |  | (161406) |  |  | Cuts context    |
|  |  | (161407) |  |  | 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* | 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 (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. | Findings nos. | Photo nos.                    | Drawing nos. 16208                                                                                                     | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| /           | /             | 1610633<br>To                 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> | Date: 26.1.18                                                                                                 |
|             |               | 1610637<br>1610638 To 1610640 | SHEET 22                                                                                                               | Initials: CV-F6-DG                                                                                            |
|             |               |                               |                                                                                                                        | Checked by:                                                                                                   |

# ADDITIONAL INFORMATION

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

NATURAL INFILLING OF A CREATION PIT. IT IS SIMILAR TO THE NATURAL/MOUND MATERIAL THAT LET US THINK THAT IS FORMED WHEN THE PIT WAS MADE AND SO PROBABLY SOME TIME IS PASSED BETWEEN THE CREATION OF [161407] AND THE FILLING OF IT WITH (161405)

Refer to context

161404 161420  
161407 161405

161411

## 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 16     |                 | [161407]                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [161407]        | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                     |
|--|--|----------|--|--|---------------------|
|  |  | 161406   |  |  | Same as context     |
|  |  | [161407] |  |  | Cuts context 161417 |
|  |  | (161417) |  |  | Cut by context      |

## CUT

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

## DESCRIPTION

|                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |       |          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------|
| Shape                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |       |          |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input checked="" type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |       |          |
| Orientation                                                                                                                                                                                                                                                                                        | Sides                                                                                                                                                                                                                                                                    | Base                                                                                                                                                                                                                          |       |          |
| <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br><input checked="" type="checkbox"/> N                                                                                                           | <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* | <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                                                                                                                                                                                                                                                                                          | 1.15                                                                                                                                                                                                                                                                     | 0.80                                                                                                                                                                                                                          | 0.31  |          |
| 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"/>                                                                                  |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |       |          |

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <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) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## FILL/DEPOSIT

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

## DESCRIPTION

|                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 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<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"/> CTR <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"/><br>frequency <input type="checkbox"/> bulk find <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                       |

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <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 | Find nos | Photo nos                                                                                                                     | Drawing nos |
|            |          | 1610633 to 1610640                                                                                                            | D 16208     |
|            |          | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>#22 |             |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> construction <input type="checkbox"/> use <input type="checkbox"/> disuse |
| Date 26.1.18                                                                                                  |
| Initials CV. PG. FG                                                                                           |
| Checked by                                                                                                    |

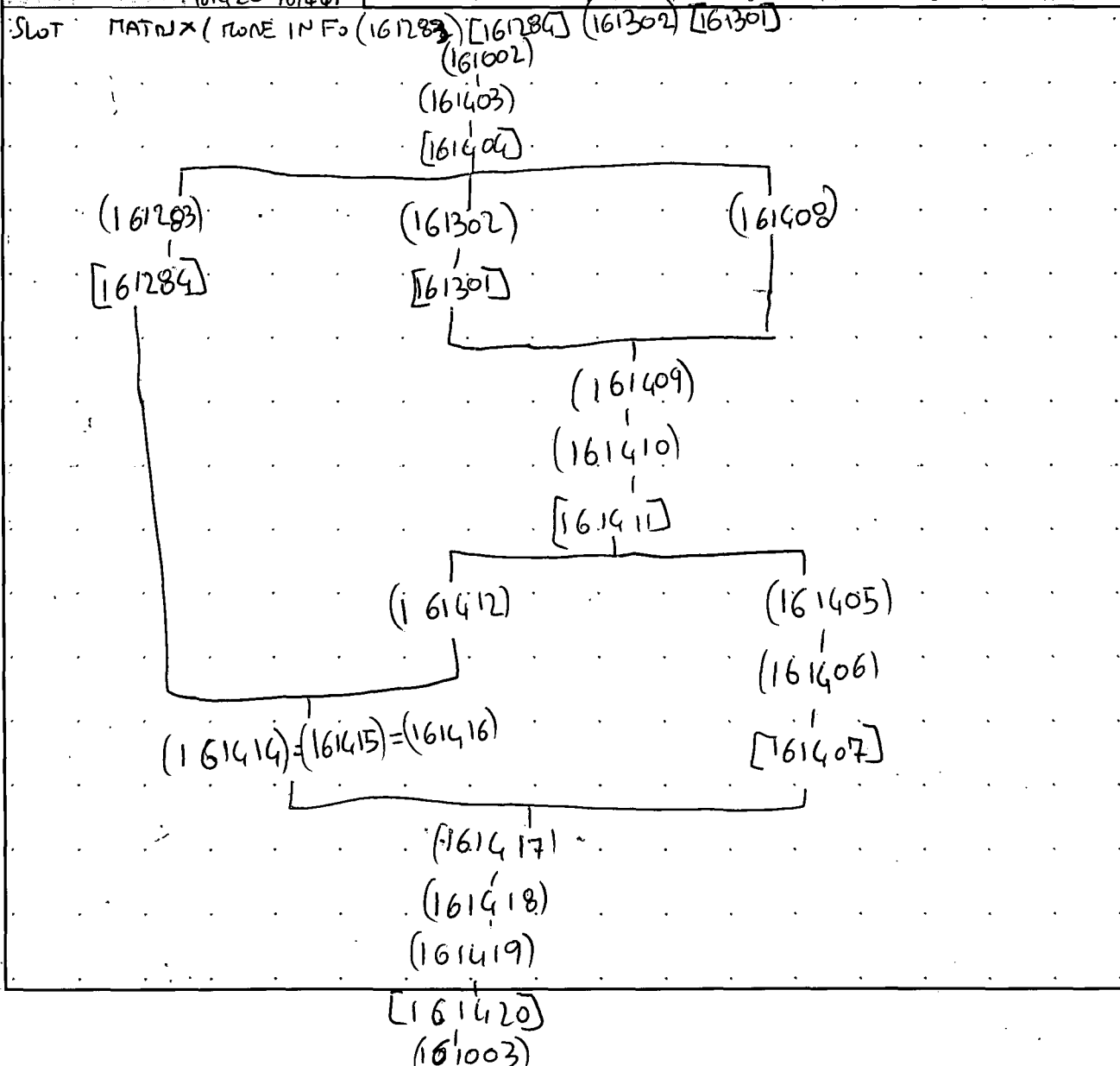
# ADDITIONAL INFORMATION

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

CUT OF A CREATION PIT DISTURBED BY THE NEGOT OF THE  
RING DITCH OF THE FOUND ITS FILL) EXPECALY (161409) WERE  
EXPOSED FOR SOME TIME PROBABLY. DUE THE COUN AND THE  
COMPOSITION OF (161408), ~~EXPOSED~~ HIS MOST POSSIBLE ORIGIN IS  
(161405). THE EXPOSITION TO THE NATURAL ELEMENT IS  
ALSO THE REASON WHY 161405 IS SPREAD IN A LARGE  
AREA (2,50 m ABOUT). CAN BE ALSO THAT THERE WAS MORE  
THAN A CREATION PIT.

Refer to context 161404 161409  
161420 161401

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





## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161404) |  |  | Same as context |
|  |  | (161408) |  |  | Cuts context    |
|  |  | (161409) |  |  | 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><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="margin-left: 10px;">           sloping         </div> </div> |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                 |

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

# INTERPRETATION

| Compaction                                             |                                                                                                                                                                | Colour                                                                                        |                                                                         | Composition                      |                                                                    |
|--------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|----------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> compact                       | <input type="checkbox"/> light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/> | <input type="checkbox"/> clayey <input type="checkbox"/> clay                                 | <input checked="" type="checkbox"/> silty <input type="checkbox"/> silt | <input type="checkbox"/> loose   | <input type="checkbox"/> sandy <input type="checkbox"/> sand       |
| <input checked="" type="checkbox"/> moderately compact | <input type="checkbox"/> brownish <input type="checkbox"/> brown                                                                                               | <input type="checkbox"/> gravelly <input type="checkbox"/> gravel                             | <input type="checkbox"/> peaty <input type="checkbox"/> peat            | <input type="checkbox"/> friable | <input type="checkbox"/> grey <input type="checkbox"/> orange      |
|                                                        | <input type="checkbox"/> 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     |
| Thickness                                              |                                                                                                                                                                | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> |                                                                         | other* <input type="checkbox"/>  |                                                                    |
| 0.16                                                   |                                                                                                                                                                |                                                                                               |                                                                         |                                  |                                                                    |
| Inclusions                                             |                                                                                                                                                                |                                                                                               |                                                                         |                                  |                                                                    |
| use the<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                                                                                                                                        | chalk                                                                                         | iron pan                                                                | manganese                        | charcoal                                                           |
|                                                        |                                                                                                                                                                |                                                                                               |                                                                         |                                  | plant remains*                                                     |
|                                                        |                                                                                                                                                                |                                                                                               |                                                                         |                                  | wood                                                               |
|                                                        |                                                                                                                                                                |                                                                                               |                                                                         |                                  | marine shell                                                       |
|                                                        |                                                                                                                                                                |                                                                                               |                                                                         |                                  | bone*                                                              |
|                                                        |                                                                                                                                                                |                                                                                               |                                                                         |                                  | pot                                                                |
|                                                        |                                                                                                                                                                |                                                                                               |                                                                         |                                  | fired clay / CBM                                                   |
|                                                        |                                                                                                                                                                |                                                                                               |                                                                         |                                  | CTP                                                                |
|                                                        |                                                                                                                                                                |                                                                                               |                                                                         |                                  | mortar/plaster                                                     |
|                                                        |                                                                                                                                                                |                                                                                               |                                                                         |                                  | leather/textile                                                    |
|                                                        |                                                                                                                                                                |                                                                                               |                                                                         |                                  | glass                                                              |
|                                                        |                                                                                                                                                                |                                                                                               |                                                                         |                                  | metal                                                              |
|                                                        |                                                                                                                                                                |                                                                                               |                                                                         |                                  | industrial waste                                                   |
|                                                        |                                                                                                                                                                |                                                                                               |                                                                         |                                  | lithics                                                            |
|                                                        |                                                                                                                                                                |                                                                                               |                                                                         |                                  | coarse stone                                                       |
| frequency                                              | <input checked="" type="checkbox"/>                                                                                                                            | <input type="checkbox"/>                                                                      | <input type="checkbox"/>                                                | <input type="checkbox"/>         | <input checked="" type="checkbox"/>                                |
| 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                                                                                                            | 16208                                                                                                                                                                                                      |
|------------|-----------|--------------------------|------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 16204      | /         | 1610633<br>To<br>1610634 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> | <div> <div>Construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/></div> <div>Date 25.1.18</div> <div>Initials cv</div> <div>Checked by</div> </div> |



# ADDITIONAL INFORMATION

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

DELIBERATE BACKFILL OF ~~SHALLOW~~ RING DITCH  
 ITS COLOR WAS DARK BROWN - GREYISH WITH A CLAY-SILTY  
 TEXTURE  
 FOUND TWO PIECE OF POT AND SOME SMALL FRAGMENT  
 OF POT.  
 ITS COLOR WAS PROBABLY THE RESULT OF ~~THE~~ CHARCOAL  
 INSIDE THE LAYER

Refer to context

161404  
 161420

161405  
 161407  
 161411

(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 16</b> | Sub-area/Trench                   | Context number<br><b>(161409)</b>                                                                           |
| ECB #                    | Subgroup                    | Parent context<br><b>(161411)</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161408)</b> |  |  | Same as context |
|  |  | <b>(161409)</b> |  |  | Cuts context    |
|  |  | <b>(161410)</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><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                                                                                                       |  | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                         | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input 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 checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input checked="" 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"/></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><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                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                 |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |              |
| 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 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"/> |              |

## CROSS REFERENCE

|            |           |                          |                                                                                                                                        |
|------------|-----------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                | Drawing nos                                                                                                                            |
|            |           | 1610633<br>TO<br>1610640 | 16208<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>#22 |

## Basic process

|                                       |                              |                                            |
|---------------------------------------|------------------------------|--------------------------------------------|
| construction <input type="checkbox"/> | use <input type="checkbox"/> | disuse <input checked="" type="checkbox"/> |
| Date                                  | 25.1.18                      |                                            |
| Initials                              | CJFB-RG                      |                                            |
| Checked by                            |                              |                                            |

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

# ADDITIONAL INFORMATION

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

NATURAL INFILLING. OF ~~THE~~ RING-DITCH

ITS COLOR WAS YELLOW-GREYISH WITH A REALLY CLAY TEXTURE.

IT WAS UNDER A BLACK LAYER OF CHARCOAL.

~~AND~~ FOUND SOME PIECES OF LITHICS AND TWO SMALL FRAGMENTS OF LITHIC.

~~AND~~ FOUND ALSO A SMALL PIECE OF POT.

Refer to context

161404

161420

161405

161407

161411

## 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 16     |                 | (161410)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | (161411)        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161409) |  |  | Same as context |
|  |  | (161410) |  |  | Cuts context    |
|  |  | (161411) |  |  | Cut by context  |

## INTERPRETATION

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

## INTERPRETATION

| Compaction                                                        |                                                                                                                              | Colour                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                  | Composition                                                              |                                                                                                                                                                                |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input checked="" type="checkbox"/> moderately compact<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"/> | 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>bluish <input type="checkbox"/> blue <input type="checkbox"/> | clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay | <input checked="" type="checkbox"/> clay<br><input type="checkbox"/> silt<br><input type="checkbox"/> sand<br><input type="checkbox"/> gravel<br><input type="checkbox"/> peat |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input checked="" type="checkbox"/> moderately compact            |                                                                                                                              |                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                  | silty <input checked="" type="checkbox"/> <input type="checkbox"/> silt  |                                                                                                                                                                                |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    |                                                                                                                              |                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                  | sandy <input type="checkbox"/> <input type="checkbox"/> sand             |                                                                                                                                                                                |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> friable                                  |                                                                                                                              |                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                  | gravelly <input type="checkbox"/> <input type="checkbox"/> gravel        |                                                                                                                                                                                |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                                                                                                              |                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                  | peaty <input type="checkbox"/> <input type="checkbox"/> peat             |                                                                                                                                                                                |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                                                                                                              |                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                          |                                                                                                                                                                                |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.06                                                              |                                                                                                                              | black <input checked="" 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="checkbox"/>                                                                                          | <input type="checkbox"/>                                                                                                   | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/>                                                 | <input checked="" type="checkbox"/>                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 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 type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <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                                                                                                            | 16203 | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| 16205      | /         | 1610633<br>to<br>1610644 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> | # 22  | Date 25.1.18.                                                                                                 |
|            |           |                          |                                                                                                                        |       | Initials CV F R                                                                                               |
|            |           |                          |                                                                                                                        |       | Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

DELIBERATE BACKFILL OF ~~WATER~~ RING DITCH  
 ITS COLOR WAS BLACK FOR THE GREAT AMOUNT OF  
 CHARCOAL INSIDE THE LAYER.  
 IT WAS UNDER A LAYER OF YELLOW CLAY.  
 NO FINDS

Refer to context

161404

161420

161405

161407

161411

## 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 16     |                 | 161411                                                                                                 |
| ECB#      | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | 161411          | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |          |  |                               |
|--|--|----------|----------|--|-------------------------------|
|  |  | (161410) |          |  | Same as context               |
|  |  | (161411) |          |  | Cuts context 161412<br>161405 |
|  |  | (161412) | (161405) |  | 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 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"/> |  |                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                               | 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 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 type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input checked="" type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                    | ditch <input type="checkbox"/>                 |  |
| <input type="checkbox"/> N<br><input checked="" type="checkbox"/>                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                               |                                    | ring-ditch <input checked="" type="checkbox"/> |  |
| Dimensions                                                                                                                                                                                                                                                                                         |  | Length                                                                                                                                                                                                                                                                           | Width | Depth                                                                                                                                                                                                                         | Diameter                           | beam slot <input type="checkbox"/>             |  |
| in metres                                                                                                                                                                                                                                                                                          |  | 6.00                                                                                                                                                                                                                                                                             | 3.60  | 0.74                                                                                                                                                                                                                          |                                    | construction cut <input type="checkbox"/>      |  |
| 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"/>                                                                                  |  |                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                               |                                    |                                                |  |
| 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 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"/> |           | 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"/> |                  |
| Thickness                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                    |           | other fill/deposit (describe below) <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                  |
| Inclusions                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                  |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                     |  | stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | chalk | iron pan                                                                                                                                                                                                                                                                                                                           | manganese | charcoal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | plant remains*   |
|                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | wood             |
|                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | marine shell     |
|                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | bone*            |
|                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | pot              |
|                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | fired clay / CBM |
|                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | CTP              |
|                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | mortar/plaster   |
|                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | leather/textile  |
|                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | glass            |
|                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | metal            |
|                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | industrial waste |
|                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | lithics          |
|                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | coarse stone     |
| frequency                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                  |
| bulk find                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                  |

## CROSS REFERENCE

|            |           |                                                                                                                        |             |
|------------|-----------|------------------------------------------------------------------------------------------------------------------------|-------------|
| Sample nos | Finds nos | Photo nos                                                                                                              | Drawing nos |
|            |           | 1610633<br>To<br>1610640                                                                                               | 16208       |
|            |           | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |             |
|            |           | SHEET 22                                                                                                               |             |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date 26.1.18                                                                                                  |
| Initials CV. PL. FG                                                                                           |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

## RECUT OF THE RING DITCH [161420]

IT HAS A CURVILINEAR SHAPE, MODERATE SIDES AND UNEVEN BASE

IT HAD ~~THE~~ THREE DIFFERENT FILLS: (161408) A CLAY-SILTY BLACK LAYER WITH SOME POT INSIDE, (161409) A YELLOW CLAY WITH SOME LITHICS AND (161410) THAT WAS A CHARCOAL LAYER.

IT CUT TWO DIFFERENT FILLS (161412) THAT IS PART OF THE PRINCIPAL RING DITCH, AND (161405) THAT IS PART ~~OF ANOTHER RING DITCH OR THE CORNER~~ OF A CREMATION.

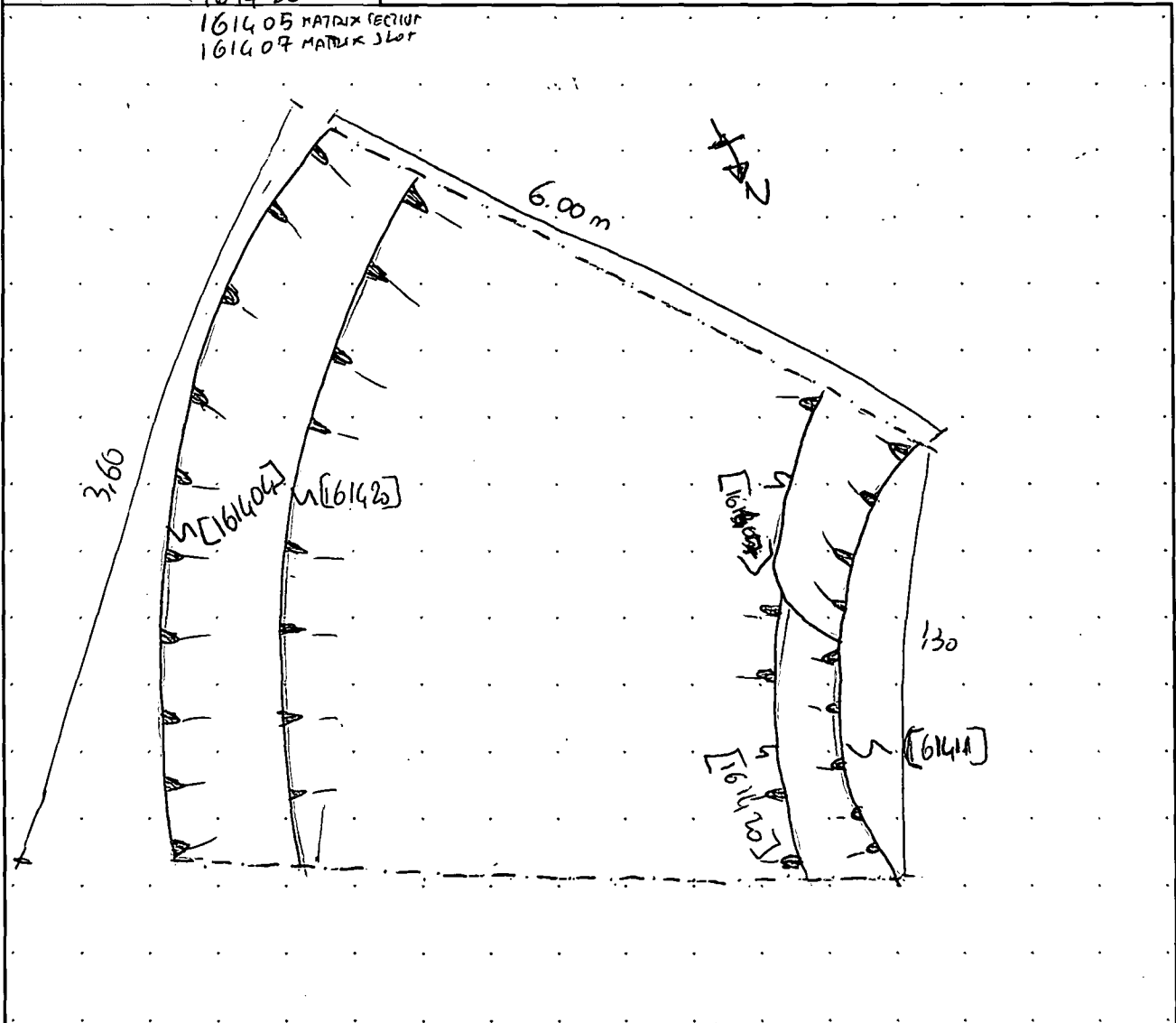
Refer to context

161404 SECTION  
161420 PLAN

161405 MATRIX SECTION  
161407 MATRIX SLOT

## 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 16</b> | Sub-area/Trench<br><b>—</b>       | Context number<br><b>(161412)</b>                                                                                      |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>        | Parent context<br><b>[161410]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                                |
|--|--|-----------------|--|--|--------------------------------|
|  |  | <b>[161411]</b> |  |  | Same as context                |
|  |  | <b>(161412)</b> |  |  | Cuts context <b>—</b>          |
|  |  | <b>[161414]</b> |  |  | Cut by context <b>[161411]</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"/> |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                   |              |                 | <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<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>                                                                                                                                                                                                                                                                            | <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 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 type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input checked="" 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 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"/><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"/></p> |
| <b>Thickness</b><br><b>O. 20.</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<br><b>—</b> | Finds nos<br><b>—</b> | Photo nos<br><b>1610633</b><br><b>To</b><br><b>1610640</b> | Drawing nos <b>D 16.208</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>#22</b> |
|------------------------|-----------------------|------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>25/01/18</b>                                                                                                     |
| Initials <b>RG/FG/cv</b>                                                                                                 |
| Checked by <b>—</b>                                                                                                      |

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

# ADDITIONAL INFORMATION

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

NATURAL IN FILLING UP THE DITCH, WHICH IN THE FIRST  
IT IS NOT BY THE [161411] THAT (1.15) APPROXIMATELY  
RECUIT OF THE DITCH ITS POSITION IS VERY SIMILAR  
TO (161409), SO PROBABLY WHO MADE THE RECUIT LEFT  
THE MATERIAL EXTRACTED FROM THE DITCH IN THE NEARBY  
THIS ENDED UP AGAIN INSIDE LATER, FROM THE EXTERNAL  
PART.

Refer to context

161404

161420

161405

161407

161411

## 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 16</b> | Sub-area/Trench                     | Context number<br><b>(16 14 14)</b>                                                                                    |
| ECB#                     | Subgroup                    | Parent context<br><b>[16 14 20]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                   |  |  |                                                       |
|--|--|-------------------|--|--|-------------------------------------------------------|
|  |  | <b>(16 14 12)</b> |  |  | Same as context<br><b>16 14 15</b><br><b>16 14 16</b> |
|  |  | <b>(16 14 14)</b> |  |  | Cuts context                                          |
|  |  | <b>(16 14 17)</b> |  |  | Cut by context<br><b>16 12 84</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>✓ <input type="checkbox"/> NE-SW<br>✓ <input type="checkbox"/> NW-SE<br>N<br>⬆                                                                                                                     | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>L <input type="checkbox"/> steep<br>L <input type="checkbox"/> moderate sloping<br>L <input type="checkbox"/> gentle<br>L <input type="checkbox"/> stepped<br>L <input type="checkbox"/> undercutting<br>L <input type="checkbox"/> complex* | <b>Base</b><br>I <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 checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input checked="" 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 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 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>0.36</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>bulk find                                                                                                                                                                | 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<br>bulk find                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|             |            |                                                                    |                                                                                                                                                        |
|-------------|------------|--------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos. | Finds nos. | Photo nos.<br><b>1610633</b><br>to<br><b>1610640</b><br><b>#22</b> | Drawing nos. <b>D 16 208</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|-------------|------------|--------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☐ disuse ☒

Date **26.1.18**  
Initials **CV-RG-FG**  
Checked by

# ADDITIONAL INFORMATION

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

DELIBERATE BACK FILL OF RING DITCH -  
 IT WAS MODERATELY COMPACT WITH A LIGHT RED-GREYISH  
 COLOR AND A SAND SILTY TEXTURE.  
 IT WAS CUT BY [161284] A CREMATION WITH VESSEL  
 (IT WAS ON THE EAST SIDE OF THE DITCH.  
 FOR MORE INFORMATIONS SEE (161415) AND (161283)  
 AND [161284]

Refer to context

161404  
 161420  
 161405  
 161407  
 161411

## 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 16     |                 | (161415)                                                                                               |
| ECB#      | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [161420]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |                  |
|--|--|----------|--|--|-----------------|------------------|
|  |  | (161412) |  |  | Same as context | 161414<br>161416 |
|  |  | (161415) |  |  | Cuts context    |                  |
|  |  | (161417) |  |  | Cut by context  |                  |

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

## 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                                                                                                                                             |  | <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* |
|                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                    |
| <b>Dimensions</b>                                                                                                                                                                                                                                                            |  | <b>Length</b>                                                                                                                                                                                                                                                 | <b>Width</b> | <b>Depth</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"/>                                                                       |  |                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                    |

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

## INTERPRETATION

| Compaction                                                        |                                                                                                                                                  | Colour                                                                   |                          | Composition                                                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------|-------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | light <input checked="" type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/> | clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay |                          | silty <input checked="" type="checkbox"/> <input type="checkbox"/> silt |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input checked="" type="checkbox"/> moderately compact            | brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown                                                                      | sandy <input type="checkbox"/> <input checked="" type="checkbox"/> sand  |                          | gravelly <input type="checkbox"/> <input type="checkbox"/> gravel       |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    | greyish <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> grey                                                             | peaty <input type="checkbox"/> <input type="checkbox"/> peat             |                          |                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> friable                                  | orangeish <input checked="" type="checkbox"/> <input type="checkbox"/> orange                                                                    |                                                                          |                          |                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   | yellowish <input type="checkbox"/> <input type="checkbox"/> yellow                                                                               |                                                                          |                          |                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   | reddish <input type="checkbox"/> <input type="checkbox"/> red                                                                                    |                                                                          |                          |                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   | blueish <input type="checkbox"/> <input type="checkbox"/> blue                                                                                   |                                                                          |                          |                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                                                                                                                                  |                                                                          |                          |                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.28                                                              | 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                                                         | F                                                                                                                                                |                                                                          |                          |                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                         | <input type="checkbox"/>                                                                                                                         | <input type="checkbox"/>                                                 | <input type="checkbox"/> | <input type="checkbox"/>                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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

| CROSS REFERENCE |           |                          |                                                                                                                                            |
|-----------------|-----------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos      | Finds nos | Photo nos                | Drawing nos                                                                                                                                |
| /               | /         | 1610633<br>to<br>1610640 | D 16.208<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br># 22 |

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

|            |            |
|------------|------------|
| Date       | 26.1.17    |
| Initials   | CV. PG. FG |
| Checked by |            |

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

# ADDITIONAL INFORMATION

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

DELIBERATE BACKFILL OF RING DITCH. . .  
 IT WAS MODERATELY COMPACT WITH A LIGHT GREY ORANGEISH COLOR AND A SAND, SILTY TEXTURE.  
 IT HAS BEEN FORMED, PROBABLY, IN THE SAME EVENTS AND IN THE SAME WAY (THE MATERIAL WAS FIRST EXTRACTED AND THEN PUT BACK IN FOR UNKNOWN REASONS) OF (161414) AND (161416).  
 THEY ARE JUST A SLIGHT DIFFERENT OF COLOR  
 THIS SUGGESTS THAT THEY HAVE BEEN PUT BACK IN AT DIFFERENT TIMES BUT WITH THE SAME INTENTIONS, FOR THIS REASON WE CONSIDER THEM PART OF THE SAME EVENT

Refer to context

161404  
 161420  
 161405  
 161407  
 161411

## SKETCHES

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



## STRATIGRAPHY

|  |  |          |  |  |                 |                  |
|--|--|----------|--|--|-----------------|------------------|
|  |  | (161412) |  |  | Same as context | 161414<br>161415 |
|  |  | (161416) |  |  | Cuts context    |                  |
|  |  | (161417) |  |  | 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 checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |               |                                                                                                                                                                                                                                                                                                     |              |                 |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input checked="" type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><br>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><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex*<br>sloping |              |                 |
|                                                                                                                                                                                                                                                                                                         |               | <b>Base</b><br><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*                                                        |              |                 |
| <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)<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 checked="" 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 checked="" type="checkbox"/> <input type="checkbox"/> brown                                                                      |                          | silty <input checked="" type="checkbox"/> <input type="checkbox"/> silt  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                                        | greyish <input type="checkbox"/> <input checked="" type="checkbox"/> grey                                                                        |                          | sandy <input type="checkbox"/> <input checked="" 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 checked="" type="checkbox"/> <input type="checkbox"/> red                                                                         |                          |                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                                        | blueish <input type="checkbox"/> <input type="checkbox"/> blue                                                                                   |                          |                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                                        |                                                                                                                                                  |                          |                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.50                                                              |                                                        | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                    |                          | other* <input type="checkbox"/>                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Inclusions                                                        |                                                        |                                                                                                                                                  |                          |                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                                | chalk                                                                                                                                            | iron pan                 | manganese                                                                | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |                          |
| frequency                                                         | ///                                                    |                                                                                                                                                  |                          |                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                         | <input type="checkbox"/>                               | <input type="checkbox"/>                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/>                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <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 checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|            |           | 1610633<br>to<br>1610640 | 16208<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br># 22 | Date 26-1-18<br>Initials CV-RG-FE<br>Checked by                                                                          |



# ADDITIONAL INFORMATION

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

DELIBERATE BACKFILL OF RING DITCH.

IT WAS MODERATELY COMPACT WITH A GREY-REDDISH  
COLOR AND A SAND SILTY TEXTURE.  
FOR MORE INFORMATION SEE (161415) S;

Refer to context 161404  
161420  
161405  
161407  
161411

## SKETCHES

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

## STRATIGRAPHY

|  |  |             |  |  |                 |
|--|--|-------------|--|--|-----------------|
|  |  | (16 14 14)  |  |  | Same as context |
|  |  | (16 14 17)  |  |  | Cuts context    |
|  |  | ✓(16 14 18) |  |  | Cut by context  |

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

## INTERPRETATION

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

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

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

## INTERPRETATION

| Compaction                                                        |                                                        | Colour                                                                                                                                |                          | Composition                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|--------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input checked="" type="checkbox"/> moderately compact | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> |                          | clayey <input 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 checked="" type="checkbox"/> silt  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                                        | greyish <input type="checkbox"/> <input type="checkbox"/> grey                                                                        |                          | sandy <input checked="" 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 checked="" type="checkbox"/> <input checked="" type="checkbox"/> red                                                   |                          |                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                                        | blueish <input type="checkbox"/> <input type="checkbox"/> blue                                                                        |                          |                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                                        |                                                                                                                                       |                          |                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.08                                                              |                                                        | 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                                                         | M                                                      |                                                                                                                                       |                          |                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                         | <input type="checkbox"/>                               | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/>                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

topsoil ☐

subsoil ☐

geological subsoil ☐

remnant topsoil ☐

surface ☐

occupation layer ☐

dumped layer ☐

deliberate backfill ☐

destruction debris ☐

bedding layer ☐

natural infilling ☒

colluvial layer ☐

in situ burning ☐

post-pipe ☐

packing ☐

cremation ☐

other fill/deposit (describe below) ☐

### Basic process

|             |               |                          |                                                                                                                        |          |                                                                                                               |
|-------------|---------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|----------|---------------------------------------------------------------------------------------------------------------|
| Sample nos. | Findings nos. | Photo nos.               | Drawing nos.                                                                                                           | D 16 208 | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| /           | /             | 1610633<br>TO<br>1610640 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> | #22      | Date 26.1.18<br>Initials CV. FG. RG<br>Checked by                                                             |

# ADDITIONAL INFORMATION

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

NATURAL WEILLING OF RING DITCH.  
IT WAS MODERATELY COMPACT WITH A RED ORANGEISH COLOR  
AND A SILT SANDY TEXTURE  
IT WAS ON EAST SIDE OF THE DITCH.

Refer to context

161404

161420

161405

161407

161411

## 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 16</b> | Sub area/Trench                   | Context number<br><b>(161418)</b>                                                                                      |
| ECB#                     | Subgroup                    | Parent context<br><b>[161420]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|          |                 |
|----------|-----------------|
| (161417) | Same as context |
| (161418) | Cuts context    |
| (161419) | 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>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 checked="" 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"/> <input type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat | 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>0.10                                                                                                                                                              | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
| frequency<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                                                                                                                                                                                                                                                                                                                                                  | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |

## CROSS REFERENCE

|            |           |                          |                                                                                                                                        |
|------------|-----------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                | Drawing nos                                                                                                                            |
| /          | /         | 1610633<br>to<br>1610640 | 16208<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>#22 |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>26.1.18</b>                                                                                           |
| Initials <b>CV.FG.PG</b>                                                                                      |
| Checked by                                                                                                    |

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

NATURAL WEILLING OF: RING DITCH. : :  
IT WAS MODERATELY COMPACT WITH A GREY BLUEISH COLOR  
AND A CLAY SANDY TEXTURE  
NO FINDS

161404  
161420  
161405  
161407  
161411

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

161405  
161407  
161411

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                          |                             |                                 |                                                                                                                        |
|--------------------------|-----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench                 | Context number<br><b>(161419)</b>                                                                                      |
| ECB#                     | Subgroup                    | Parent context<br><b>161420</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161418)</b> |  |  | Same as context |
|  |  | <b>(161419)</b> |  |  | Cuts context    |
|  |  | <b>(161420)</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                                                                                                                                                                                                                                                               |  | 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 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<br>greyish <input checked="" type="checkbox"/> grey<br>orangeish <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> red<br>blueish <input type="checkbox"/> blue |          | <b>Composition</b><br>clayey <input type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat |          | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input 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>0.32</b>                                                                                                                                                       |         | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                    |          | other* <input type="checkbox"/>                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |         |                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |
| frequency                                                                                                                                                                             | stones* | chalk                                                                                                                                                                                                                                                                                                                                                                                                                            | iron pan | manganese                                                                                                                                                                                                                                         | charcoal |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains* | wood | marine shell | bone* | pot | fired clay / CBM | CTP | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone |
| bulk find                                                                                                                                                                             |         |                                                                                                                                                                                                                                                                                                                                                                                                                                  |          |                                                                                                                                                                                                                                                   |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |

## CROSS REFERENCE

|            |           |           |             |
|------------|-----------|-----------|-------------|
| Sample nos | Finds nos | Photo nos | Drawing nos |
|            |           | 1610633   | 16208       |
|            |           | 20        |             |
|            |           | 1610640   | #22         |

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date: <b>26.1.18</b>                                                                               |
| Initials: <b>CV. FG. RG</b>                                                                        |
| Checked by:                                                                                        |

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

# ADDITIONAL INFORMATION

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

NATURAL INFILLING OF RING DITCH  
 IT WAS MODERATELY COMPACT WITH A RED GREYISH COLOR  
 AND SILT SANDY TEXTURE  
 IT WAS THE FIRST FILL, FOR AGE, OF THE ANCIENT RING  
 DITCH

Refer to context

161404

161420

161405

161407

161411

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 16</b> | Sub-area/Trench                 | Context number<br><b>161420</b>                                                                                        |
| ECB #                    | Subgroup                    | Parent context<br><b>161420</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                              |
|--|--|-----------------|--|--|------------------------------|
|  |  | <b>(161419)</b> |  |  | Same as context              |
|  |  | <b>(161420)</b> |  |  | Cuts context <b>(161003)</b> |
|  |  | <b>(161003)</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 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 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>I <input type="checkbox"/> E-W<br>I <input checked="" type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                                     | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input checked="" type="checkbox"/> steep<br>I <input type="checkbox"/> moderate sloping<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input 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><b>3.60</b>                                                                                                                                                                                                                                                                                   | <b>Width</b><br><b>3.20</b>                                                                                                                                                                                                                              | <b>Depth</b><br><b>0.95</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>                                                                                                                                                           | <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><b>/</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610633</b><br><b>70</b><br><b>1610640</b> | Drawing nos <b>D 16208</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>SHEET 22</b> |
|------------------------|-----------------------|------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>26.1.18</b>                                                                                           |
| Initials <b>CV.FG.RG</b>                                                                                      |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

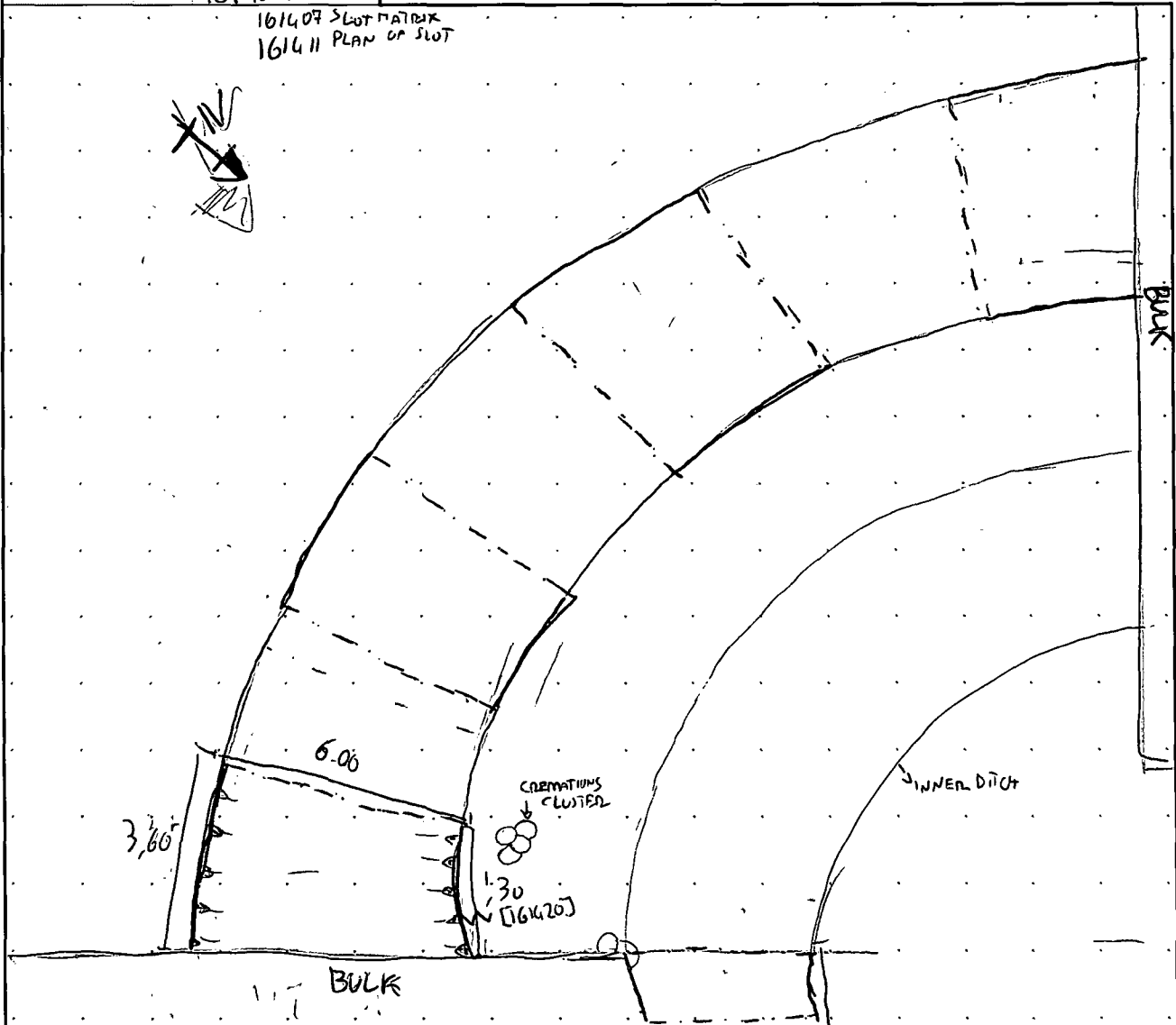
CUT OF THE RING DITCH, WHO IS THE BASE OF THE TOWN. THE PART EXCAVATED IN THIS SWT SHOW A CURVE IN NNE DIRECTION. AS THE SAME AN IN THE OTHER SLOTS IT WAS AT ONE POINT FILLED ([161414](161415)(161416)) USING THE BANK MATERIAL ACCUMULATED ON BOTH SIDES. AT ONE POINT A NEW CUT WAS MADE [161411] AND THE ALL OF THIS CUT SHOW SIGNS OF A EATEN FREQUENTATION THAT RESULTS IN A POSSIBLE FINE PIT AND A DEPRESSION ([161980] AND [161301]). THE ORIGINAL EDGE LINE OF THE DITCH WAS ALSO DISTURBED BY [161407] THAT IS A CUT OF A DEPRESSION, SIMILAR AT THE CLUSTER OF DEPRESSION AT ABOUT 2.50,

Refer to context

161404 SECTION  
161161905 MATRIX

161407 SLOT MATRIX  
161411 PLAN OF SLOT

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



## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161570) |  |  | Same as context |
|  |  | (161421) |  |  | Cuts context    |
|  |  | (161003) |  |  | Cut by context  |

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

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                     |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| <b>Shape</b><br>sub- <input checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                     |                                                                                                                                                                                                                                              | pit <input 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> <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><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="margin-left: 10px;">           sloping         </div> </div> |                     | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     |  | <b>Length</b><br>1 <del>2.08</del>                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>Width</b><br>2.8 | <b>Depth</b><br>2.52                                                                                                                                                                                                                         | <b>Diameter</b><br>—                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |  |  |
| <b>Shape result of:</b> (tick 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

[illegible]

## Basic process

|                                                                                     |                                                                                     |                                              |                                                                                                                                          |                                                                                                               |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos.                                                                         | Finds nos.                                                                          | Photo nos.                                   | Drawing nos.                                                                                                                             | construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
|  |  | 1610642-<br>1610645 +<br>1610974-<br>1610979 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D.16210<br>#24 | Date 19.2.18<br>Initials DD/G1/CS<br>Checked by                                                               |

# ADDITIONAL INFORMATION

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

- CUT OF INNER DITCH, FIRST EXCAVATED 26.1.18. HOWEVER EDGES WERE NOT CLEAR AND SO THE SLOT WAS REVISITED ALONG WITH A WIDENING OF THE BULK SECTION. #
- EDGE ON SE SIDE IS CLEAR BUT THE EDGE ON THE NW SIDE HAS BEEN HEAVILY DISTURBED - POSSIBLY BY ANIMALS.

Refer to context [161428] - PLAN

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

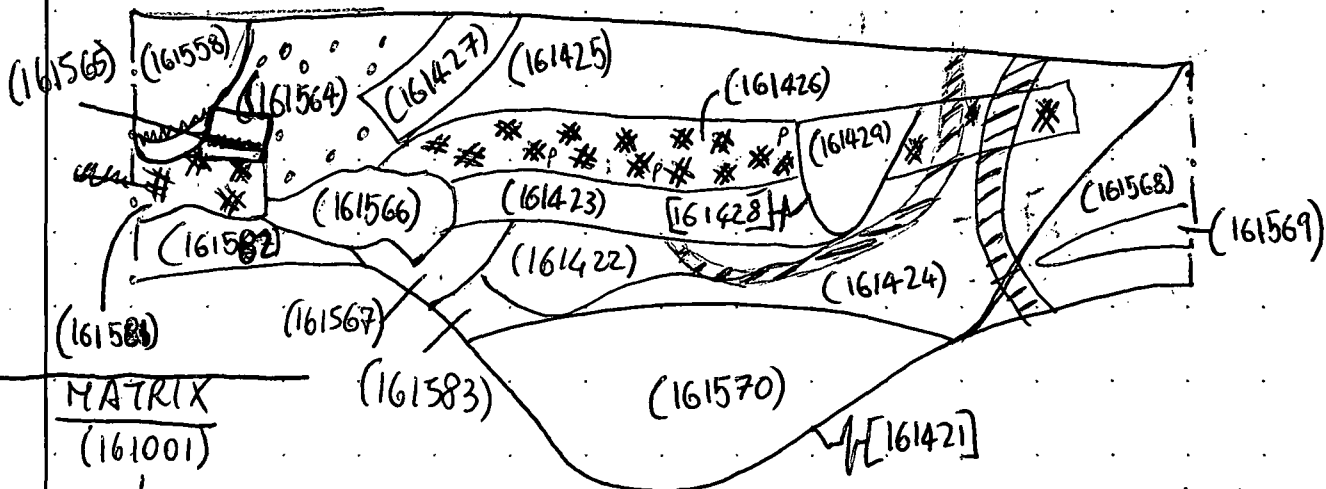
D.16210.1

SW FACING SECTION OF INNER RING DITCH

D.16210.2

NW

SE



MATRIX

(161001)

(161558)

(161564)

(161565) (161427)

(161425)

(161429)

(161428)

(161566) (161426)

(161567) (161423)

(161422)

(161424)

(161570)

[161421] (161569)

(161568)

(161003)

KEY:

# = Charcoal

P = Roots / BIOTURBATION

[ ] = gravel

[ ] = POT/BIOTURBATION

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench                   | Context number<br><b>(161422)</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context<br><b>[161421]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                     |          |  |                 |
|--|--|---------------------|----------|--|-----------------|
|  |  | (161423)            |          |  | Same as context |
|  |  | (161422)            |          |  | Cuts context    |
|  |  | <del>(161421)</del> | (161424) |  | 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 type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                 |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>H <input type="checkbox"/> E-W<br>✓ <input type="checkbox"/> NE-SW<br>✓ <input type="checkbox"/> NW-SE<br>N<br>▲                                                                                                                                |  | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>\ <input type="checkbox"/> steep<br>/ <input type="checkbox"/> moderate 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 type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |  | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input 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>0.38m</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<br><b>1</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610842-1610645 + 1610974 - 1610979</b> | Drawing nos<br><b>SHEET 24</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D 16210</b> |
|------------------------|-----------------------|---------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>26/01/18-20/2/18</b>                                                                                  |
| Initials <b>DD/CB-LI-RE</b>                                                                                   |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

PRIMARY FILL OF ~~THE~~ INNER DITCH OF A ROUND BARROW.  
THE DITCH IS NOT EXACTLY CLEAR AS IT HAS BEEN  
HEAVILY DISTURBED BY BIO TURBATION.

THIS FILL IS VERY HOMOGENOUS COMPARED TO THE NOTIFIED  
MOUND MATERIAL SURROUNDING THIS DITCH.  
NO FINDS FROM THIS DITCH.

\* 20.2.18 AFTER FURTHER EXC THIS IS THE POSSIBLE  
THIRD FILL OF INNER DITCH.

[161428] FOR PLAN

Refer to context

[161421] FOR 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>TEA 16</b> | Sub area/Trench                  | Context number<br><b>C161423</b>                                                                                       |
| ECB#                    | Subgroup                    | Parent context<br><b>[16142]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |                 |
|--|--|-----------------|--|--|-----------------|-----------------|
|  |  | <b>[161428]</b> |  |  | Same as context |                 |
|  |  | <b>[161423]</b> |  |  | Cuts context    |                 |
|  |  | <b>[161422]</b> |  |  | Cut by context  | <b>[161428]</b> |

## CUT

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

## DESCRIPTION

## INTERPRETATION

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

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | <b>Colour</b><br>light <input type="checkbox"/> mid <input 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 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 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>0.20</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"/> 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<br> | Finds nos<br> | Photo nos<br><b>1610642 -<br/>1610645<br/>1610974 -<br/>1610979</b> | Drawing nos<br><b>SHEET 14</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D161210</b> |
|----------------|---------------|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>26/01/18</b>                                                                                                     |
| Initials <b>DD</b>                                                                                                       |
| Checked by                                                                                                               |

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



# ADDITIONAL INFORMATION

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

FILL OF DITCH [161421] - INNER DITCH WHICH IS PART OF THE SEQUENCE OF A ROUND BARROW. THIS IS THE SECOND AND POTENTIAL FINAL FILL OF THE DITCH, HOWEVER IT IS NOT CLEAR BECAUSE IT HAS BEEN HEAVILY DISTURBED BY ROOTING AND A LATER CAPPING THE DITCH (161426). THIS FILL HAS ALSO BEEN CUT BY A POSSIBLE POST HOLE [161428] WHICH ~~AND~~ TRUNCATES (161426) AS WELL. DUE TO THESE TRUNCATIONS THE EXTENT OF THIS FILL IS UNCLEAR.

## SECTION PLAN

Refer to context [161421] + [161428]

## SKETCHES

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

STRATIGRAPHIC MATRIXSTRATIGRAPHY

**CUT**

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

## DESCRIPTION

## INTERPRETATION

## FILL/DEPOSIT

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

**DESCRIPTION:**

## INTERPRETATION

### CROSS REFERENCE

### Basic process

*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)

\* AFTER FURTHER STRIPPING THIS INNER DITCH WAS FULLY EXPOSED AND THIS FIL IS THE PRIMARY FIL OF THE DITCH RATHER THAN JUST MOUND MATERIAL.

Refer to context [161421] for SECTION (consider: location plan, detailed plan showing relationships, section showing fills/deposits as appropriate) SKETCHES

## 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>TEA16</b> | Sub-area/Trench | Context number<br><b>(161425)</b>                                                                                      |
| ECB#                    | Subgroup                   | Parent context  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161427) |  |  | Same as context |
|  |  | (161425) |  |  | Cuts context    |
|  |  | (161429) |  |  | 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>                                                                                                                                   | <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 type="checkbox"/> dark <input checked="" 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 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 checked="" type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in-situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>0.24                                                                                                                                                              | 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"/> 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"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <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 | Find nos | Photo nos                                    | Drawing nos                                                                                                                       |
|            |          | 1610872-<br>1610645 +<br>1610974-<br>1610979 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D661210 |

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date 26/01/18                                                                                                 |
| Initials PD                                                                                                   |
| Checked by                                                                                                    |

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)

[illegible]

Refer to context [161421][161428]

This image shows a full page of blank graph paper. The grid consists of small squares formed by thin black lines. There are approximately 20 columns and 20 rows of squares. A thicker vertical line runs down the left side of the page, creating a margin. There are some minor dark spots or artifacts scattered across the page, likely due to scanning or age of the paper.

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                 |                                                                                                                                   |
|-------------------------|-----------------------------|-----------------|-----------------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench | Context number<br><b>161426</b>                                                                                                   |
| ECB#                    | Subgroup                    | Parent context  | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |            |  |                          |
|--|--|----------|------------|--|--------------------------|
|  |  | (161428) |            |  | Same as context (161673) |
|  |  | (161426) | = (161673) |  | Cuts context             |
|  |  | (161423) |            |  | Cut by context (161424)  |

## 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>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"/> |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <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"/>                                       |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                        |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 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"/> 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 checked="" type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><b>0.14</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* <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"/>                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| bulk find <input type="checkbox"/>                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|                             |                                                       |                                                       |                                                                                                                                                                           |
|-----------------------------|-------------------------------------------------------|-------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S16253</b> | Finds nos<br><b>1610642-1610645 + 1610974-1610979</b> | Photo nos<br><b>1610642-1610645 + 1610974-1610979</b> | Drawing nos<br><b>SHEET 2A</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16210</b> |
|-----------------------------|-------------------------------------------------------|-------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>26/01/18</b>                                                                                          |
| Initials <b>DD</b>                                                                                            |
| Checked by                                                                                                    |

KUBIANA TIN

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)

THIS IS A DUMPED LAYER ~~AT~~ WHICH IS PART OF SEQUENCE WITHIN A MOUND ASSOCIATED TO A ROUND BARROW. THIS LAYER SLOPES DOWN, FOLLOWING THE GRADIENT OF THE MOUND, ~~AND~~ ~~ON~~ ~~THE~~ THE EXTENT IS NOT CLEAR AS IT MAY BE DISRUPTED OR TRUNCATED BY OTHER MOUND ~~AND~~ DEPOSITS. THIS LAYER WAS CHARCOAL RICH AND CONTAINED A LOT OF PREHISTORIC POT, SOME BONE (NOT COLLECTED) AND WORKED FLINT. THIS DEPOSIT CAPS A POTENTIAL INNER DITCH [161421]: AS WELL AS ~~ON~~ MOUND MATERIAL (161424). IT HAS ALSO BEEN TRUNCATED BY A POSSIBLE POSTHOLE [161428] HOWEVER ~~THAT~~ THAT FEATURE HAS ALSO BEEN CAPPED BY THE UPPER MOUND DEPOSITS (161425).

## PLAN

[161428]

(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>TEA16</b> | Sub-area/Trench | Context number<br><b>(161427)</b>                                                                                      |
| ECB#                    | Subgroup                   | Parent context  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|                                |                                                 |
|--------------------------------|-------------------------------------------------|
| (161425) = (161427) = (161422) | Same as context <b>(161422)</b> <b>(161425)</b> |
|                                | Cuts context                                    |
|                                | Cut by context                                  |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br><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 type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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                                                                                                                                  |
|            |           | 1610642-<br>1610645 +<br>1610974-<br>1610979 | SHEET 24<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16210 |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date: 26/01/18                                                                                                |
| Initials: DD                                                                                                  |
| Checked by:                                                                                                   |

# ADDITIONAL INFORMATION

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

THIS IS A POTENTIAL DEPOSITED DUMP LAYER THAT IS PART  
OF A MOUND BUILT UP AS PART OF A ROUND BARROW.

THIS ~~LAYER IS A~~ EXTENT OF THIS LAYER IS NOT CLEAR, IT MAY  
JUST BE PART OF (161425) BUT HAS BEEN DISTURBED BY  
OTHER MATERIAL. ON ITS WEST SIDE THERE IS POTENTIAL EVAL  
MATERIAL, WHICH MAY HAVE DISTURBED THIS DEPOSIT.

## SECTION PLAN

Refer to context [161421][161428]

## 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>TEX 16</b> | Sub-area/Trench                   | Context number<br><b>[161428]</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context<br><b>[161421]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                              |
|--|--|-----------------|--|--|------------------------------|
|  |  | <b>(161429)</b> |  |  | Same as context              |
|  |  | <b>(161428)</b> |  |  | Cuts context <b>(161426)</b> |
|  |  | <b>(161426)</b> |  |  | Cut by context               |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |                      |          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------|
| Shape <b>UNKNOWN</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"/> |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |                      |          |
| 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>                                                                                                                   | <input type="checkbox"/> vertical<br><input checked="" type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                      |          |
| Dimensions<br>in metres                                                                                                                                                                                                                                                      | Length<br><b>N/A</b>                                                                                                                                                                                                                                                     | Width<br><b>0.34</b>                                                                                                                                                                                                          | Depth<br><b>0.30</b> | Diameter |
| Shape result of (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input checked="" 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 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                                                                                                                                             | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| Inclusions                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| 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"/> | 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) |  |
| frequency                                                                                                                                             | bulk find: <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |

## CROSS REFERENCE

|            |           |                                                                            |                                                                                                                                                            |
|------------|-----------|----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                                                  | Drawing nos                                                                                                                                                |
|            |           | <b>1610642 -</b><br><b>1610645 +</b><br><b>1610974 -</b><br><b>1610979</b> | <b>SHEET 26</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16210</b> |

## Basic process

|                                       |                              |                                 |
|---------------------------------------|------------------------------|---------------------------------|
| construction <input type="checkbox"/> | use <input type="checkbox"/> | disuse <input type="checkbox"/> |
| Date                                  | <b>26/01/18-19/2/18</b>      |                                 |
| Initials                              | <b>DD/CS-RL-BJ</b>           |                                 |
| Checked by                            |                              |                                 |

# ADDITIONAL INFORMATION

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

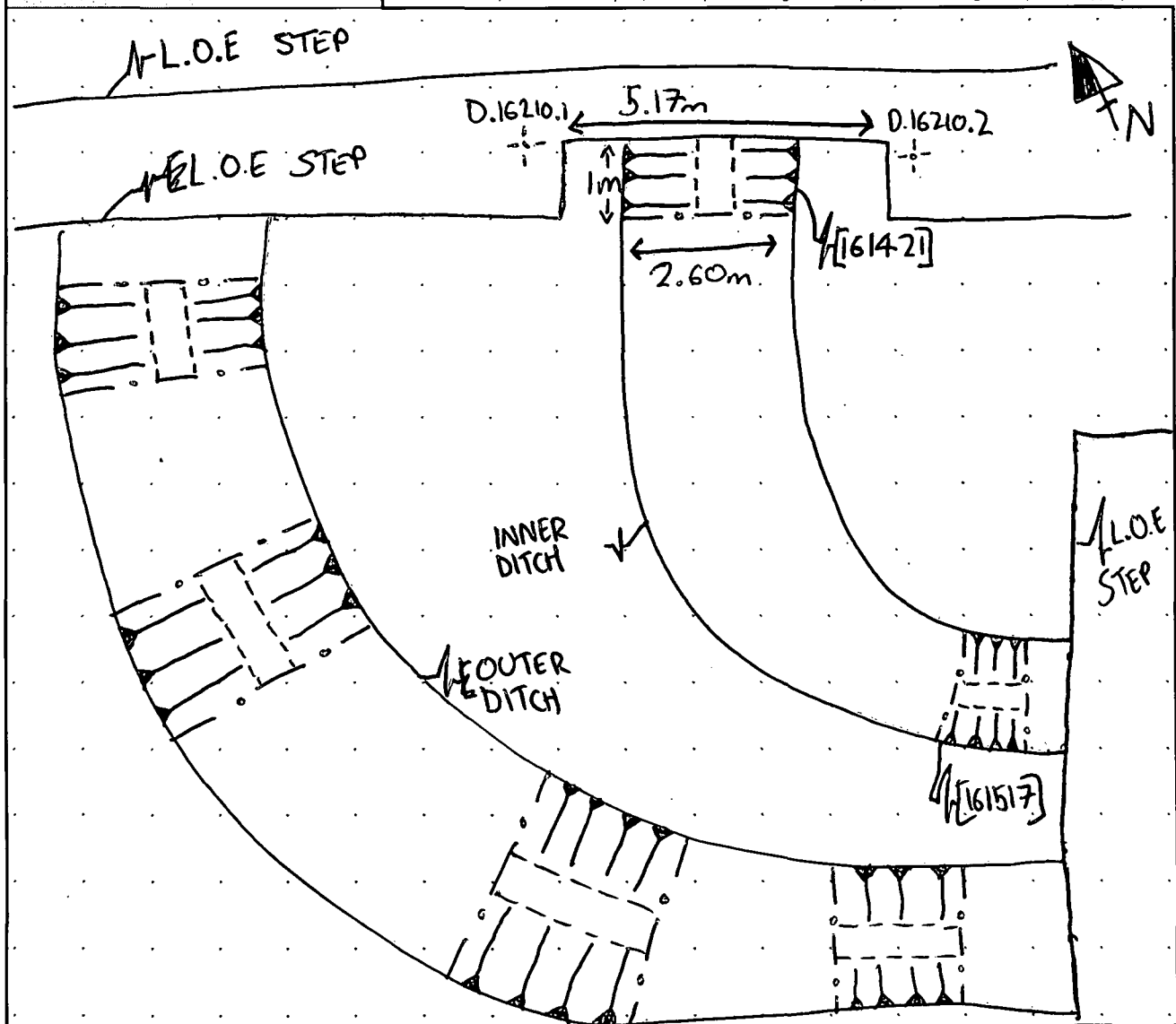
THIS IS THE PROBABLE CUT OF A POTENTIAL POST HOLE, THAT TRUNCATES A DUMPED LAYER OF MOUND MATERIAL ASSOCIATED TO A ROUND BORROW. THIS POSTHOLE HAS ALSO TRUNCATED THE UPPER FILL OF THE INNER RING DITCH (161423). THIS FEATURE WAS ONLY NOTICEABLE IN THE SECTION SO THE EXTENT IS UNKNOWN. ONE FILL AND NO FUNDS.

PLAN REDONE ON 19.2.18 AS THE STEP/BULK HAD CHANGED IN SHAPE & INTERPRETATION WAS CLEARER.

Refer to context [161421] FOR 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>TEA16</b> | Sub-area/Trench                   | Context number<br><b>(161429)</b>                                                                                      |
| ECB#                    | Subgroup                   | Parent context<br><b>[161428]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161425)</b> |  |  | Same as context |
|  |  | <b>(161429)</b> |  |  | Cuts context    |
|  |  | <b>[161428]</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>                                                                                                                                   | <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"/>                                       |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <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 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 type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><b>0-30</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                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| frequency<br>bulk find                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|            |           |                                              |                                                                                                                                              |
|------------|-----------|----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                    | Drawing nos                                                                                                                                  |
|            |           | 1610642-<br>1610645 +<br>1610974-<br>1610979 | 8116ET24<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16210 |

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>26/01/18</b>                                                                               |
| Initials <b>DD</b>                                                                                 |
| Checked by                                                                                         |

# ADDITIONAL INFORMATION

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

THIS IS THE FILL OF A POTENTIAL POST HOLE [161428]  
 THIS WAS ONLY NOTICEABLE IN THE SECTION OF A SWT. THIS  
 FILL IS MID PURPLISH BROWN AND IS MOST LIKELY A NATURAL  
 INFILLING.  
 NO FINDS.

SECTION

PLAN

Refer to context: [161421] & [161428]

SKETCHES

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

Blank grid area for sketches and drawings.



## STRATIGRAPHY

|  |  |         |  |  |                 |
|--|--|---------|--|--|-----------------|
|  |  | ( )     |  |  | Same as context |
|  |  | (16430) |  |  | Cuts context    |
|  |  | [16431] |  |  | Cut by context  |

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

## INTERPRETATION

| Shape                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |
| Orientation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Sides                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |       | Base                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |          |
|  <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE<br><br> 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Diameter |
| in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |
| design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |

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

## INTERPRETATION

| Compaction                                                        |                                                        | Colour                                                                                                                     |                                                                     | Composition                       |                                          |
|-------------------------------------------------------------------|--------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|-----------------------------------|------------------------------------------|
| <input type="checkbox"/> compact                                  | <input checked="" type="checkbox"/> moderately 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"/> loose                                    | <input type="checkbox"/> friable                       | brownish <input type="checkbox"/> brown <input type="checkbox"/>                                                           | <input type="checkbox"/> grey <input type="checkbox"/>              | silty <input type="checkbox"/>    | <input type="checkbox"/> silt            |
|                                                                   |                                                        | orangeish <input type="checkbox"/> orange <input type="checkbox"/>                                                         | <input type="checkbox"/> yellow <input checked="" type="checkbox"/> | sandy <input type="checkbox"/>    | <input checked="" type="checkbox"/> sand |
|                                                                   |                                                        | yellowish <input type="checkbox"/> reddish <input type="checkbox"/>                                                        | <input type="checkbox"/> red <input type="checkbox"/>               | gravelly <input type="checkbox"/> | <input type="checkbox"/> gravel          |
|                                                                   |                                                        | blueish <input type="checkbox"/> blue <input type="checkbox"/>                                                             |                                                                     | peaty <input type="checkbox"/>    | <input type="checkbox"/> peat            |
| Thickness                                                         |                                                        |                                                                                                                            |                                                                     |                                   |                                          |
| 0, 14m                                                            |                                                        | 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                                                         | M                                                      |                                                                                                                            |                                                                     |                                   |                                          |
| bulk find                                                         | <input type="checkbox"/>                               | <input type="checkbox"/>                                                                                                   | <input type="checkbox"/>                                            | <input type="checkbox"/>          | <input type="checkbox"/>                 |

### Basic process

|            |              |                    |                                                                                                                                  |                                                                                                                                                     |
|------------|--------------|--------------------|----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Findings nos | Photo nos          | Drawing nos                                                                                                                      | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/><br>Date: 31/01/18<br>Initials: RG<br>Checked by: |
| /          | /            | 1610868<br>1610869 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16215 |                                                                                                                                                     |



# ADDITIONAL INFORMATION

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

THIS NATURAL INFILLING COVER A GREY ~~AND~~ SANDY CLAY FILL (161434) AND IT IS ALSO OVER THE CREMATION (161432).

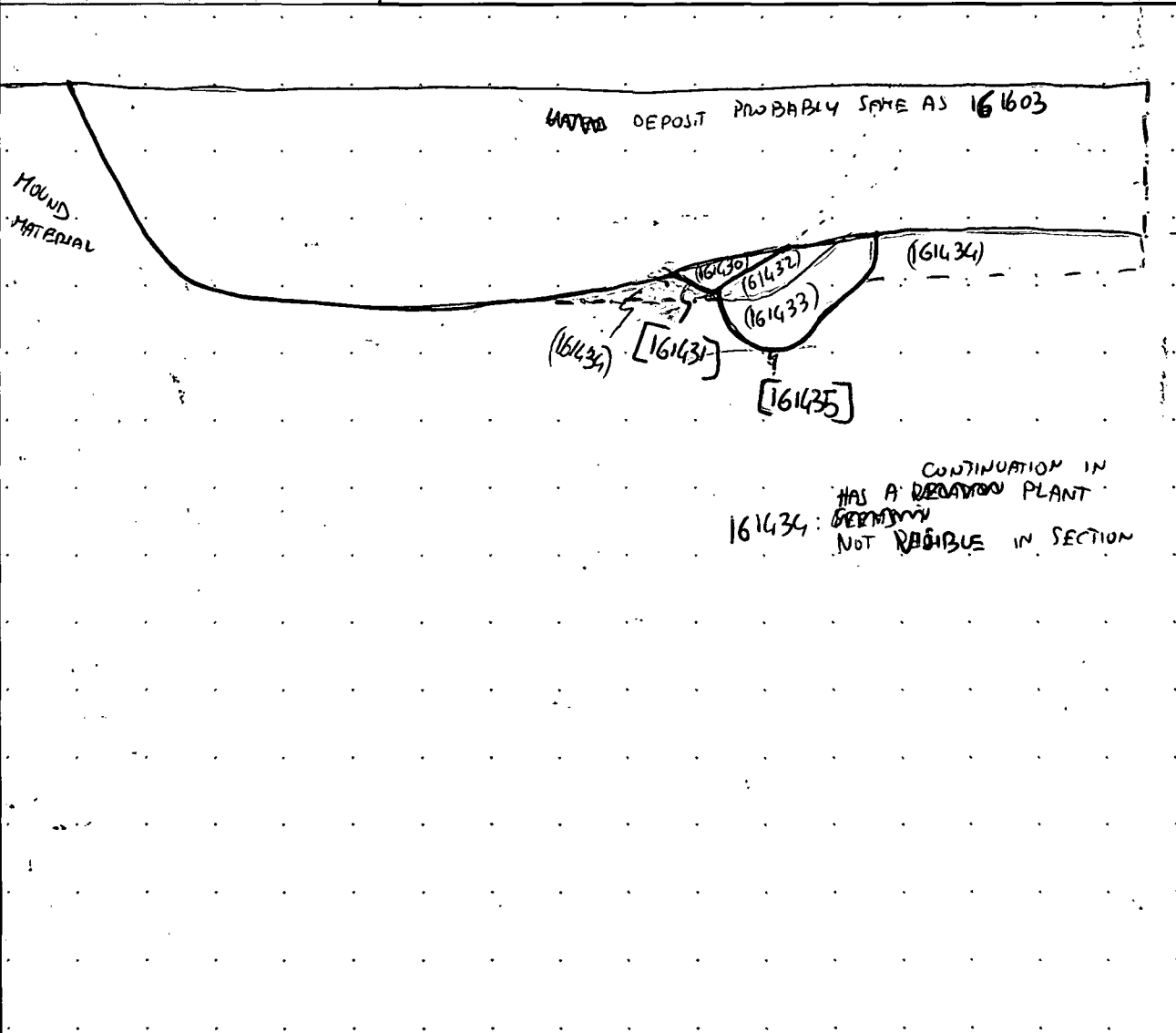
IT IS MODERATELY COMPACT, YELLOW COLOUR AND SAND COMPOSITION WITH A MODERATE FREQUENCY OF STONES (SMALL SIZE). NO FINES.

~~ACCORDING TO A PREVIOUS REPORT, THERE WAS A CUT OF A WICH AND THIS COULD BE EVIDENCE OF THE THEORETICAL CUT [161431] TREEBOLE.~~

Refer to context (161433)

## SKETCHES

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



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A16</b> | Area/Field<br><b>TEA 16</b> | Sub area/Trench<br><b>—</b>       | Context number<br><b>[161431]</b>                                                                                      |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>        | Parent context<br><b>[161431]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                                |
|--|--|-----------------|--|--|--------------------------------|
|  |  | <b>(161430)</b> |  |  | Same as context<br><b>—</b>    |
|  |  | <b>[161431]</b> |  |  | Cuts context<br><b>(06432)</b> |
|  |  | <b>(161435)</b> |  |  | Cut by context<br><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 checked="" type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                        |                      | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input checked="" type="checkbox"/> ? ditch<br><input type="checkbox"/> ring ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input 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 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 type="checkbox"/> concave<br><input checked="" type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                        |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br>0.15 m                                                                                                                                                                                                                                                                  | <b>Width</b><br>—                                                                                                                                                                                                                            | <b>Depth</b><br>0.15 m | <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 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<br>bulk find                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| stones*<br>chalk<br>iron pan<br>manganese<br>charcoal<br>plant remains<br>wood<br>marine shell<br>bone*<br>pot<br>fired clay / CBM<br>CTP<br>mortar/plaster<br>leather/textile<br>glass<br>metal<br>industrial waste<br>lithics<br>coarse stone |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|                        |                       |                                               |                                                                                                                                                                      |
|------------------------|-----------------------|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>/</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610868</b><br><b>1610869</b> | Drawing nos<br><b>#24</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16215</b> |
|------------------------|-----------------------|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date<br><b>31/01/18</b>                                                                            |
| Initials<br><b>RG/FG</b>                                                                           |
| Checked by                                                                                         |

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

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

~~CONFIDENTIAL (16630)~~

CUT OF @TREEPOLE. THIS CONTEXT CUTS THE  
PREMATION (161432) AND THE TILL (161434).  
THE SHAPE IS IRREGULAR AND ITS INFILLING  
IS (161430).

(161433)

4. (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 16     |                 | (161432)                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [161435]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |        |
|--|--|----------|--|--|-----------------|--------|
|  |  | (161432) |  |  | Same as context | 161251 |
|  |  | (161433) |  |  | Cuts context    |        |
|  |  |          |  |  | Cut by context  |        |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |  |  | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                                                                                                       | <b>Sides</b><br><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 type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown<br>greyish <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> red<br>blueish <input type="checkbox"/> blue | <b>Composition</b><br>clayey <input type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input 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 checked="" type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>0.24                                                                                                                                                                                                                         | black <input checked="" type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                   | other* <input type="checkbox"/>                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| stones*<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                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency<br>bulk find                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

|            |           |            |             |
|------------|-----------|------------|-------------|
| Sample nos | Finds nos | Photo nos  | Drawing nos |
| 16212      | /         | 1610645-48 | D1621/D1625 |
| 16230      | /         | 1610868    | #22 #24     |
|            |           | 1610864    |             |

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date 31-01-18                                                                                                 |
| Initials FG                                                                                                   |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

FILL OF A CREATION PIT. IT IS RICH OF SMALL FRAGMENT OF BONES \* BUT THE AMOUNT OF THEM DOESN'T LET ME THINK THAT IS A HUMAN CREATION. AS OTHER IN THE AREA IT IS POSSIBLE THAT IT IS A CREATION OF AN ANIMAL OR PART OF IT. DUE THE CONDITION OF THE ZONE AND THE GENERAL APPARENCE OF THE LAYER IT IS ALSO POSSIBLE THAT IT IS A DUMP MATERIAL AND NOT AN IN SITU CREATION OR ~~AN~~ IF IT IS A CREATION, IT IS STRONGLY DISTURBED BY ROOTING AND SOME LATER EVENT.

(CAN BE RELATED TO (161251))

\* BUT MOST OF THEM SEEMS TO BE ANIMAL BONES AND NOT HUMAN; SO I DON'T THINK IT IS A BURIAL.

Refer to context (161433)

## 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 16</b> | Sub area/Trench<br><b>-</b>       | Context number<br><b>(161432)</b>                                                                           |
| ECB #<br><b>-</b>       | Subgroup<br><b>-</b>        | Parent context<br><b>[161435]</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |          |
|--|--|-----------------|--|--|-----------------|----------|
|  |  | <b>(161432)</b> |  |  | Same as context | <b>-</b> |
|  |  | <b>(161433)</b> |  |  | Cuts context    | <b>-</b> |
|  |  | <b>[161435]</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><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 type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/>                                                                                                                                                      | <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"/> | 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 checked="" type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><b>0.24</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>M</b>                                                                                                                                                                    | 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"/> <input type="checkbox"/>                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|                             |                       |                                                                    |                                                                                                                                                                                 |
|-----------------------------|-----------------------|--------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S16211</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610645-48</b><br><b>1610868</b><br><b>1610869</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16211 #22</b><br><b>D16215 #24</b> |
|-----------------------------|-----------------------|--------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>31/01/18</b>                                                                                          |
| Initials <b>RG</b>                                                                                            |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

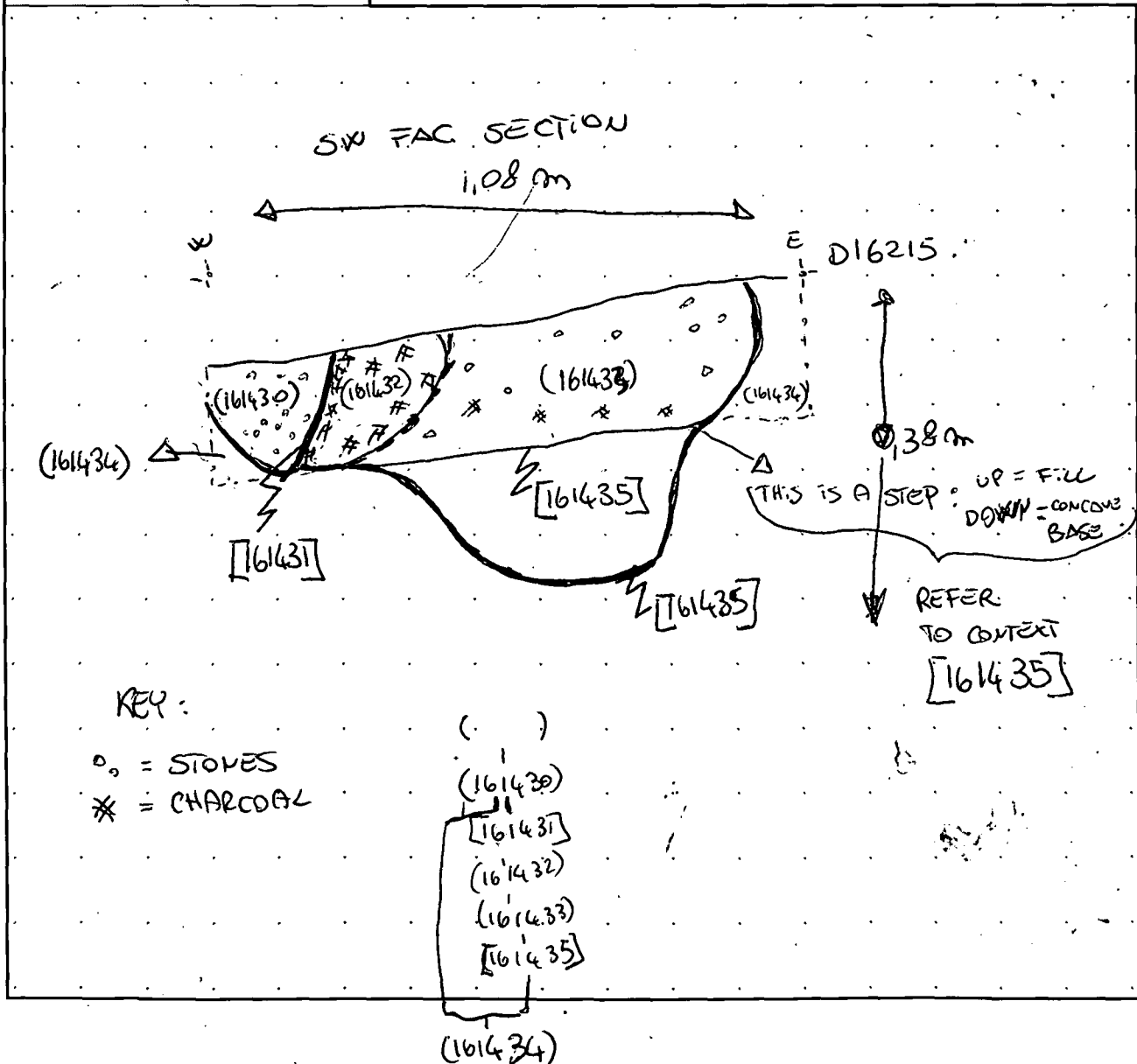
(any further details that may be important for understanding the context, including items marked \* overleaf)

FILL OF CREMATION [161435]. THIS CONTEXT IS THE PRIMARY FILL OF THE CREMATION, THE SECONDARY IS COMPLETELY BLACK FULL OF CHARCOAL IN THE SURFACE. THIS CONTEXT HAS A THICKNESS OF IS MODERATELY COMPACT, WITH A ~~RED~~ VERY DARK GREY COLOUR. THE COMPOSITION IS SILTY SAND AND THERE ARE OCCASIONAL FREQUENCY OF CHARCOAL AND A MODERATE FREQUENCY OF STONES (SMALL SIZE) IT'S POSSIBLE TO SEE SMALL PIECES OF BURNED BONES. NO POT.

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>A 14</b> | Area/Field<br><b>TEA 14</b> | Sub-area/Trench | Context number<br><b>(161434)</b>                                                                           |
| ECB#                     | Subgroup                    | Parent context  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                                |
|--|--|-----------------|--|--|--------------------------------|
|  |  | <b>(161435)</b> |  |  | Same as context                |
|  |  | <b>(161434)</b> |  |  | Cuts context                   |
|  |  |                 |  |  | Cut by context <b>(161434)</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 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 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 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 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* <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"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <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                                                                                               |
|            |           | 1610645-1610648 | D6211/D6215                                                                                               |
|            |           | 1610868         | Surveyed: #22 #24                                                                                         |
|            |           | 1610869         | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>31.01.18</b>                                                                               |
| Initials <b>RG</b>                                                                                 |
| Checked by                                                                                         |

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

GREY. MOTTLED LAYER. POSS. BUT DIPPED LAYER

Refer to context

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



|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A16       | TEA 16     |                 | [161435]                                                                                               |
| ECB#      | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [161435]        | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |          |  |  |                       |
|--|--|----------|--|--|-----------------------|
|  |  | (161433) |  |  | Same as context       |
|  |  | (161435) |  |  | Cuts context (161434) |
|  |  | (161434) |  |  | Cut by context        |

**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**  
I ☐ N-S  
H ☐ E-W  
↘ ☐ NE-SW  
↙ ☐ NW-SE

**Sides**  
L ☐ vertical  
/ ☐ steep  
\ ☐ moderate  
~ ☐ gentle  
~ ☒ stepped  
Z ☐ undercutting  
□ ☐ complex\*

**Base**  
— ☐ flat  
C ☒ concave  
V ☐ v-shaped  
/ ☐ sloping  
~ ☐ uneven  
□ ☐ complex\*

**Dimensions**  
in metres

**Length** / **Width** / **Depth** 0.36 / **Diameter** 0.45

**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  
black ☐ white ☐ other\* ☐

**Composition**  
clayey ☐ clay  
silty ☐ silt  
sandy ☐ sand  
gravelly ☐ gravel  
peaty ☐ peat  
other\* ☐

**Thickness**

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

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

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

**CROSS REFERENCE**

|            |           |                                  |                                                                                                                                               |
|------------|-----------|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                        | Drawing nos                                                                                                                                   |
| /          | /         | 1610645-68<br>1610868<br>1610869 | N1621/D1625<br>#22 #24<br>Surveyed: plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |

**Basic process**  
construction ☒ use ☐ disuse ☐

**Date** 31.01.18  
**Initials** PG  
**Checked by**

# ADDITIONAL INFORMATION

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

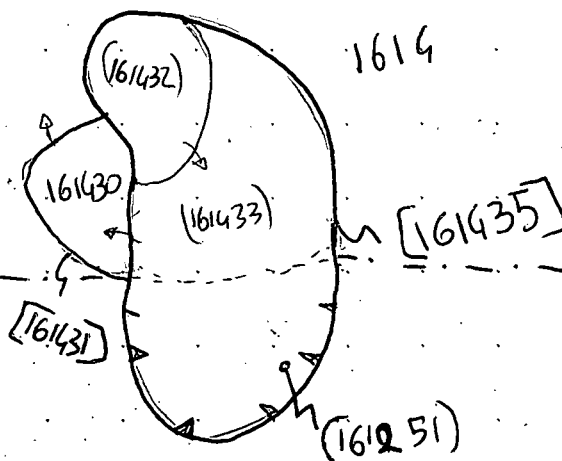
CUT UP A CREATION OR A PIT. ALL THE SIDES ARE VERY STEPPED. AND THEY MADE DIFFERENT LEVEL OF DEPOSITION FOR THE FILL. DUE TO THIS SHAPE TRUNCATED CONE SHAPE, WHEN WE HAD BEEN DIGGING THE SECTION, WE HAVE INTERCEPTED PART OF THE SIDES. ~~THAT~~ SO IN THE DRAWING AND IN THE PICTURES WE DON'T SEE THE FILL OF THE CREATION, BUT THE LAYER IN WHICH THE CUT IS PARTIALLY MADE.

Refer to context

(161433)

## SKETCHES

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





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

|                  |                      |                            |                                                                                                                        |
|------------------|----------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA 16 | Sub-area/Trench            | Context number<br>(161436)                                                                                             |
| ECB #            | Subgroup             | Parent context<br>[161437] | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |                     |          |  |                 |
|--|--|---------------------|----------|--|-----------------|
|  |  | <del>(161434)</del> | (161447) |  | Same as context |
|  |  | (161436)            |          |  | Cuts context    |
|  |  | [161437]            |          |  | Cut by context  |

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

## INTERPRETATION

| Shape                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----------|
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |          |
| Orientation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Sides                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Base                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |       |          |
|  <input type="checkbox"/> N-S<br> <input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE<br> 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 | Diameter |
| in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |          |
| Shape result of (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |          |

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

## INTERPRETATION

| Compaction                                                        |                                             | Colour                                                                                                                                                                                                     |                                                                                                                                                                                         | Composition                                                                                                                    |                                                                                                                                      |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|---------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input type="checkbox"/> moderately compact | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/>                                                                                 |                                                                                                                                                                                         | clayey <input checked="" type="checkbox"/>                                                                                     | <input type="checkbox"/> clay                                                                                                        |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input checked="" type="checkbox"/> loose                         | <input type="checkbox"/> friable            | brownish <input type="checkbox"/> greyish <input type="checkbox"/> orangeish <input type="checkbox"/> yellowish <input type="checkbox"/> reddish <input type="checkbox"/> blueish <input type="checkbox"/> | <input type="checkbox"/> brown <input type="checkbox"/> grey <input type="checkbox"/> orange <input type="checkbox"/> yellow <input type="checkbox"/> red <input type="checkbox"/> blue | silty <input type="checkbox"/> sandy <input type="checkbox"/> gravelly <input type="checkbox"/> peaty <input type="checkbox"/> | <input checked="" type="checkbox"/> silt <input type="checkbox"/> sand <input type="checkbox"/> gravel <input type="checkbox"/> peat |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                             |                                                                                                                                                                                                            |                                                                                                                                                                                         | other* <input type="checkbox"/>                                                                                                |                                                                                                                                      |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.12m in                                                          |                                             | black <input checked="" 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* <b>FREQ.</b>       | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| frequency:                                                        |                                             |                                                                                                                                                                                                            |                                                                                                                                                                                         |                                                                                                                                |                                                                                                                                      |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                         | <input type="checkbox"/>                    | <input type="checkbox"/>                                                                                                                                                                                   | <input type="checkbox"/>                                                                                                                                                                | <input type="checkbox"/>                                                                                                       | <input type="checkbox"/>                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

topsoil ☐

subsoil ☐

geological subsoil ☐

remnant topsoil ☐

surface ☐

occupation layer ☐

dumped layer ☐

deliberate backfill ☐

destruction debris ☐

bedding layer ☐

natural infilling ☐

colluvial layer ☐

in situ burning ☐

post-pipe ☐

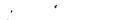
packing ☐

cremation ☒

other fill/deposit (describe below) ☐

other\* ☐

## Basic process

| Sample nos          | Finds nos                                                                           | Photo nos                     | Drawing nos                                                                                                                             | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
|---------------------|-------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| 16206<br>28 BUCKETS |  | 1610863<br>1610853<br>1610854 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D# 16212/5#22 | Date: 35/01/18<br>Initials: SMZ<br>Checked by:                                                                |

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

# ADDITIONAL INFORMATION

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

REMNANTS OF CREMATION, LIKELY SITUATED WITHIN THE  
RING BARROW ENCLOSURE DITCH.

HIGH CONCENTRATION OF BLACK BURNT MATERIAL  
WITH MODERATE FLOCKS OF CREMATED BONE - VERY FRAGMENTED  
WITH FEW PIECES IDENTIFIABLE.

NO POT PRESENT AS AN INCLUSION.

0.12-0.18m IN THICKNESS. SLOPES DOWN TO THE N.W

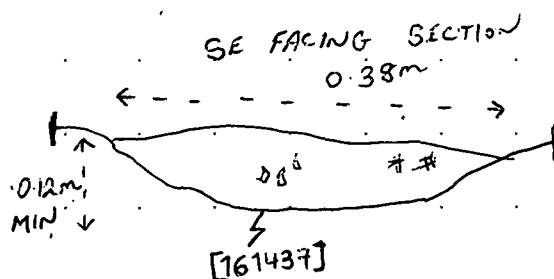
SAMPLED 100%

THEORY THAT CREMATION/POTS HAVE BEEN TRUDATED BY WATER FLOW [161447]

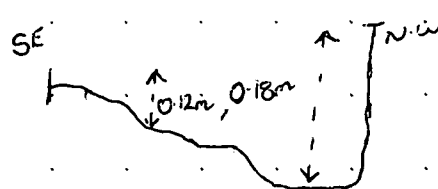
Refer to context (161436)

## SKETCHES

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



PROFILE SKETCH





# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>/</b>       | Context number<br><b>[161437]</b>                                                                                      |
| ECB#<br><b>/</b>        | Subgroup<br><b>/</b>        | Parent context<br><b>[161437]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (161436) |  |  | Same as context | / |
|  |  | [161437] |  |  | Cuts context    | / |
|  |  | (161448) |  |  | Cut by context  | / |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------|
| <b>Shape</b><br>sub- <input checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                          | pit <input 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 checked="" type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |  |                  |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input checked="" type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                                     |  | <b>Sides</b><br>1 <input type="checkbox"/> vertical<br>1 <input type="checkbox"/> steep<br>1 <input checked="" type="checkbox"/> moderate sloping<br>1 <input type="checkbox"/> gentle<br>1 <input type="checkbox"/> stepped<br>1 <input type="checkbox"/> undercutting<br>1 <input type="checkbox"/> complex* |  | <b>Base</b><br>1 <input type="checkbox"/> flat<br>1 <input type="checkbox"/> concave<br>1 <input type="checkbox"/> v-shaped<br>1 <input checked="" type="checkbox"/> sloping<br>1 <input type="checkbox"/> uneven<br>1 <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                  |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     |  | <b>Length</b><br>0.42m                                                                                                                                                                                                                                                                                         |  | <b>Width</b><br>0.38m                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                  |
|                                                                                                                                                                                                                                                                                                                    |  | <b>Depth</b><br>0.18m                                                                                                                                                                                                                                                                                          |  | <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"/>                                                  |  |                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | <b>CREMATION</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 type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown<br>greyish <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> red<br>blueish <input type="checkbox"/> blue |  | <b>Composition</b><br>clayey <input type="checkbox"/> clay<br>silty <input type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat |  | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |  |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
| stones* <input type="checkbox"/> 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.<br><b>/</b> | Finds nos.<br><b>/</b> | Photo nos.<br><b>1610863</b> | Drawing nos.<br>Surveyed:<br>plan <input checked="" type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D 16222 (5#22)</b><br><b>D 16212 (5#22)</b> |
|-------------------------|------------------------|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

construction ☒ use ☐ disuse ☐

Date **30/01/18**  
 Initials **SMZ**  
 Checked by **/**

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



# ADDITIONAL INFORMATION

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

CUT FOR "SLUB"-ROUNDED CREMATION. FAIRLY WELL  
DEFINED, AND LIKELY ONE OF SEVERAL CONTEMPORARY  
CREMATIONS [161439], [161441], [161444]

SIDES SLOPE GRADUALLY, WITH CUT SLUMPING SE/NW.

LIKELY CUT INTO FILL ASSOCIATED WITH BACKFILL OF RING  
DITCH ENCLOSURE.

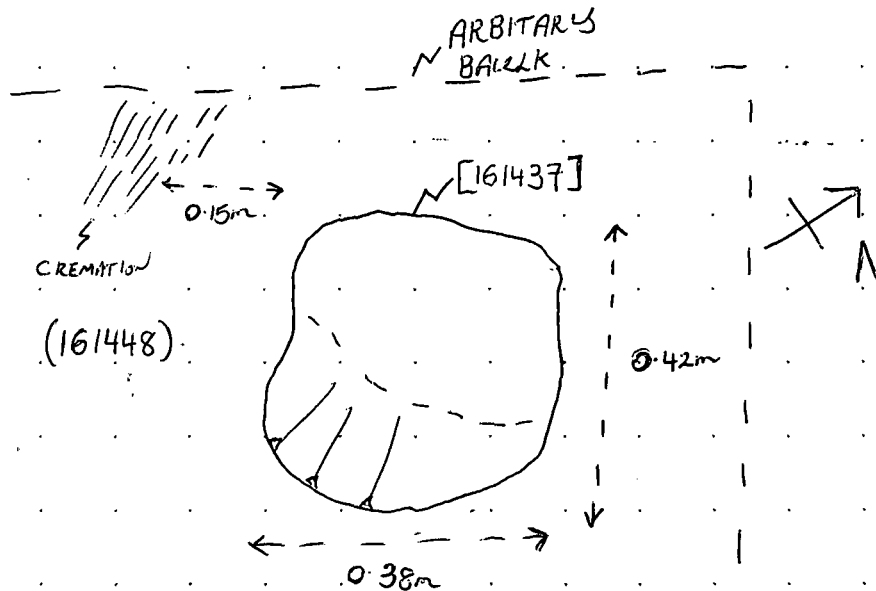
ONE OF A SERIES OF CUTS ASSOCIATED WITH CREMATION  
FEATURES IN THIS AREA.

THEORY THAT CREMATION/POTS HAVE BEEN TRUNCATED BY LATER RECENT [161447]

Refer to context [161437]

## SKETCHES

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



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                                  |            |                                 |                                                                                                                        |
|----------------------------------|------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 - TEA 16</b> | Area/Field | Sub-area/Trench                 | Context number<br><b>161438</b>                                                                                        |
| ECB #                            | Subgroup   | Parent context<br><b>161439</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |  |
|--|--|---------------|--|--|-----------------|--|
|  |  | <b>161447</b> |  |  | Same as context |  |
|  |  | <b>161438</b> |  |  | Cuts context    |  |
|  |  | <b>161439</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>                                                                                                                                         | <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* |                 |
| <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"/>                                                                       |                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                    |                 |

- ☐ 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

|                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b>                                                                                                                                                | <b>Colour</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Composition</b>                                                                                                                                                                                                                                                                                                                                       |
| <input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input checked="" type="checkbox"/> loose<br><input type="checkbox"/> friable | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input 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"/>                                                                                                                            | 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"/> |
| <b>Thickness</b>                                                                                                                                                 | <b>Other*</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                          |
| 0.11 m                                                                                                                                                           | black <input checked="" type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b>                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                | stones* <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>                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                          |

- ☐ 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>16207</b> | Finds nos<br><b>/</b> | Photo nos<br><b>161439</b> | Drawing nos<br><b>16213</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|----------------------------|-----------------------|----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>30/01/18</b>                                                                               |
| Initials <b>SLC</b>                                                                                |
| Checked by                                                                                         |

# ADDITIONAL INFORMATION

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

BLACK CLAYEY Silt BACKFILL OF CREMATION, COMPOSED MAINLY BY CHARCOAL AND BURNED MATERIALS AND WITH OCCASIONAL SMALL PEBBLES.

OCCASIONAL HEAVILY FRAGMENTED BONES DETECTED ALONG THE LOWER PART OF THE BACKFILL

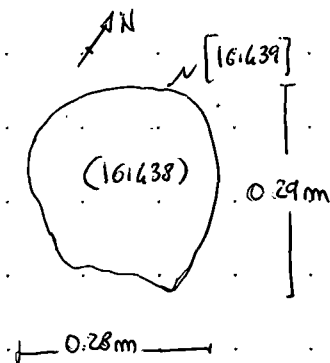
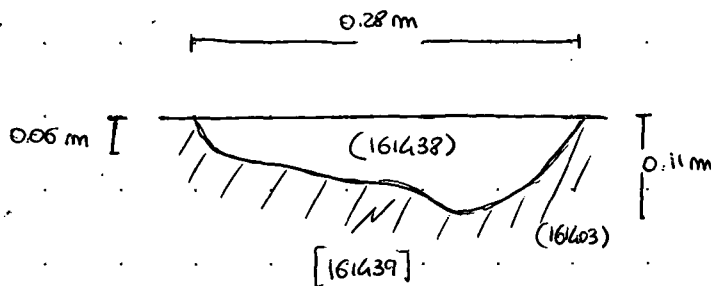
NO DATING EVIDENCES

Possibly cut by later REWT [161447]

Refer to context | 161439

## SKETCHES

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



## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 161438 |  |  | Same as context |
|  |  | 161439 |  |  | Cuts context    |
|  |  | 161448 |  |  | Cut by context  |

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                    |                         |                                                                                                                                                                                                                                                                                                                  |                        |                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-----------------|
| <b>Shape</b><br>sub- <input checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                         |                                                                                                                                                                                                                                                                                                                  |                        |                 |
| <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 <input checked="" type="checkbox"/> <b>Not APPLICABLE</b>                                                                                      |                         | <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 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>/ <input type="checkbox"/> sloping<br>~ <input checked="" type="checkbox"/> uneven<br>X <input type="checkbox"/> complex*                                                         |                        |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     | <b>Length</b><br>0.29 m | <b>Width</b><br>0.28 m                                                                                                                                                                                                                                                                                           | <b>Depth</b><br>0.11 m | <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

| <i><b>Compaction</b></i>                                          |                                  | <i><b>Colour</b></i>               |                                                                                             | <i><b>Composition</b></i>         |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|----------------------------------|------------------------------------|---------------------------------------------------------------------------------------------|-----------------------------------|---------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  |                                  | light <input type="checkbox"/>     | mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> | clayey <input type="checkbox"/>   | <input type="checkbox"/> clay   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> moderately compact                       |                                  | brownish <input type="checkbox"/>  | <input type="checkbox"/> brown                                                              | silty <input type="checkbox"/>    | <input type="checkbox"/> silt   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input 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      |                                                                                             |                                   |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <i><b>Thickness</b></i>                                           |                                  | black <input type="checkbox"/>     | white <input type="checkbox"/> other* <input type="checkbox"/>                              | other* <input type="checkbox"/>   |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <i><b>Inclusions</b></i>                                          |                                  |                                    |                                                                                             |                                   |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                          | chalk                              | iron pan                                                                                    | manganese                         | charcoal                        | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |                          |
| frequency                                                         |                                  |                                    |                                                                                             |                                   |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                         | <input type="checkbox"/>         | <input type="checkbox"/>           | <input type="checkbox"/>                                                                    | <input type="checkbox"/>          | <input type="checkbox"/>        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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                                                                                                                                                    |
|------------|-----------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|
|            |           | 1610858<br>1610864 | D16213 > 16<br>Surveyed: <b>D16221</b><br>plan <input checked="" type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |

## Basic process

construction ☐ use ☐ disuse ☐

|            |          |
|------------|----------|
| Date       | 36/01/18 |
| Initials   | sheen    |
| Checked by |          |

# ADDITIONAL INFORMATION

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

SHALL CREATION PIT, LIKELY CUT INTO THE RING BARROW ENCLOSURE DITCH  
NO VESSEL DETECTED.

\* SIDES: GENTLE SLOPE ON THE NORTH AND WEST SIDES  
STEEP ON THE SOUTH WEST SIDE  
MODERATE ON THE EAST AND NORTH EAST SIDES

## SKETCHES

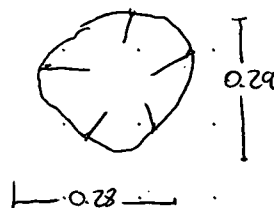
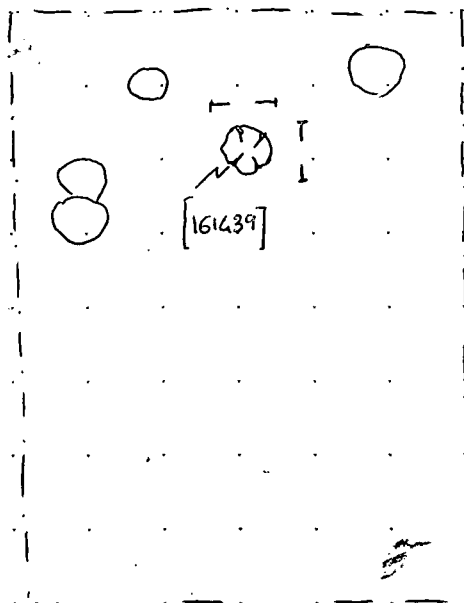
Refer to context

161439

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



SEE SECTION ON (161438)



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                               |            |                                 |                                                                                                                        |
|-------------------------------|------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>TEA16-A14</b> | Area/Field | Sub-area/Trench                 | Context number<br><b>161440</b>                                                                                        |
| ECB #                         | Subgroup   | Parent context<br><b>161441</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161447</b> |  |  | Same as context |
|  |  | <b>161440</b> |  |  | Cuts context    |
|  |  | <b>161441</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>                                                                                                                                   | <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 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"/><br>charcoally <input checked="" type="checkbox"/> <del>silty</del> | <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 checked="" type="checkbox"/> possible cremation<br><input type="checkbox"/> other fill/deposit (describe below) |
| <b>Thickness</b><br>0.05m                                                                                                                                                             | black <input checked="" type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                         | other* <input checked="" 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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |

## CROSS REFERENCE

|                             |               |                             |                                                                                                                                                   |
|-----------------------------|---------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S16208</b> | Finds nos<br> | Photo nos<br><b>1610857</b> | Drawing no <b>16214</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|-----------------------------|---------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>30/1/18</b>                                                                                |
| Initials <b>SR</b>                                                                                 |
| Checked by                                                                                         |

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

# ADDITIONAL INFORMATION

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

Fill of small circular cut, burnt material,  
Black charcoally silt.

Few stones but not much else. No sign  
of bone, no dating evidence.

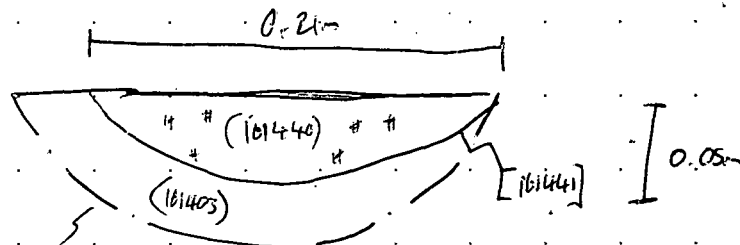
Possibly cut by JATER REW [161447]

Refer to context

## SKETCHES

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

E FACING-SECTION SKETCH OF POSS CREM



OVERCUT  
TO CHECK



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                                 |            |                                 |                                                                                                                        |
|---------------------------------|------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>TEAL6 - A14</b> | Area/Field | Sub-area/Trench                 | Context number<br><b>161441</b>                                                                                        |
| ECB#                            | Subgroup   | Parent context<br><b>161441</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161440</b> |  |  | Same as context |
|  |  | <b>161441</b> |  |  | Cuts context    |
|  |  | <b>161448</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"/><br><b>Cremation cut?</b> |
| <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 checked="" type="checkbox"/> moderate<br>L <input checked="" 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>                                                                                                                                                                                                                                                                                                     | <b>Width</b>                                                                                                                                                                                                                                             | <b>Depth</b><br><b>0.05m</b> | <b>Diameter</b><br><b>0.21m</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                          |                              |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                          |                              |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                       | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/><br>other* <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b>                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><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                                                                                                                                              |
|            |           | <b>1610859</b><br><b>1610861</b><br><b>1610857</b> | <b>Δ16214</b><br><b>Δ16220</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>30/1/18</b>                                                                                |
| Initials <b>SR</b>                                                                                 |
| Checked by                                                                                         |

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

# ADDITIONAL INFORMATION

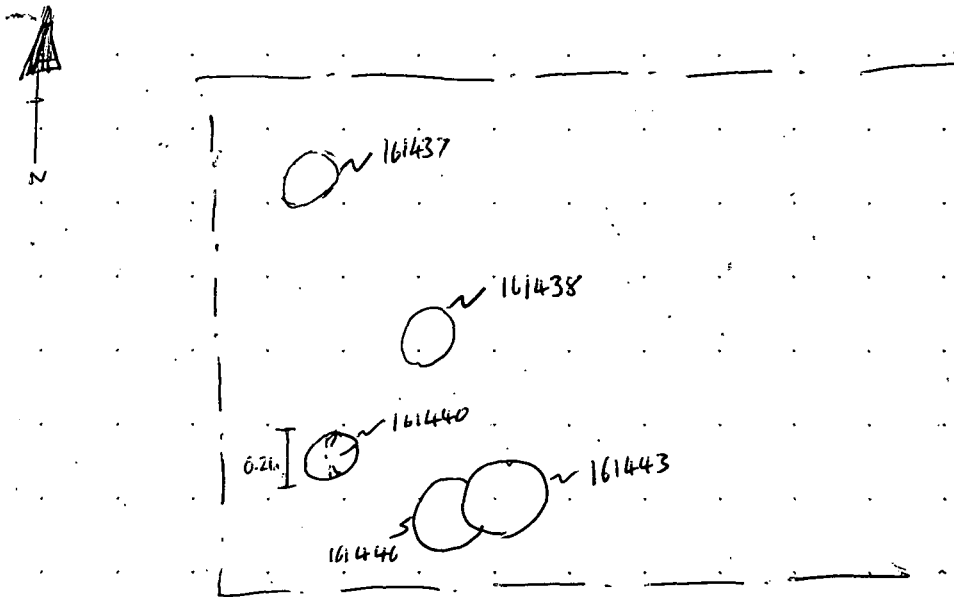
(any further details that may be important for understanding the context, including items marked \* overleaf)

Small circular pit filled with hard  
material. Possible creation but  
unclear, very shallow.

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>TEA16-14</b> | Area/Field | Sub-area/Trench                 | Context number<br><b>161443</b>                                                                                        |
| ECB #                        | Subgroup   | Parent context<br><b>161444</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161447</b> |  |  | Same as context |
|  |  | <b>161443</b> |  |  | Cuts context    |
|  |  | <b>161444</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 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* |                 |
| <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 type="checkbox"/> moderately compact<br><input checked="" type="checkbox"/> loose<br><input type="checkbox"/> friable | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br><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"/><br><i>fine silty chert</i> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                  |         |              |           |   |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b>                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                               |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                  |         |              |           |   |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>0.10m</b>                                                                                                                                                     | black <input checked="" type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | other* <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                    |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                  |         |              |           |   |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b>                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                               |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                  |         |              |           |   |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| *use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                               | <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay/CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td>O</td> <td></td> <td></td> <td>M</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 | O |  |  | M |  |  |  |  |  |  |  |  |  |  |  |  |  |  | bulk find | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| stones*                                                                                                                                                          | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | iron pan                                                                                                                                                                                                                                                                                                                                                      | manganese                | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay/CBM           | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |                  |         |              |           |   |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                        | O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                               |                          | M                        |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                  |         |              |           |   |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                                                                                                                        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <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<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 checked="" type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## CROSS REFERENCE

|                             |                            |                                                        |                                                                                                                                                                   |
|-----------------------------|----------------------------|--------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S16209</b> | Finds nos<br><b>F16306</b> | Photo nos<br><b>1610859 to 1610862 &amp; 1610865-6</b> | Drawing nos<br><b>16217</b><br>Surveyed: <b>S426</b><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|-----------------------------|----------------------------|--------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------|
| <b>Basic process</b><br>construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date: <b>30/1/18</b>                                                                                                       |
| Initials: <b>SR</b>                                                                                                        |
| Checked by:                                                                                                                |

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

# ADDITIONAL INFORMATION

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

Fill of cremation pit [161444]

Burnt material filling the pit with a few stones  
and pieces of the pot which had broken.

No evidence of bone in the bonfire as far as I  
could tell.

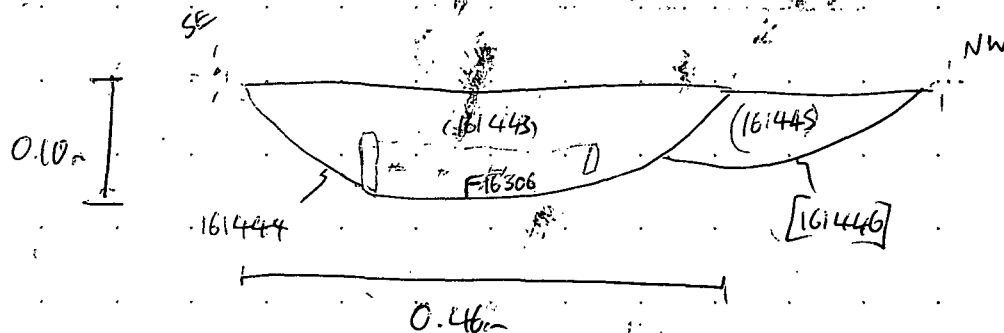
F16306 is partial pot which was dropped and  
lifted. Body buried but never trying to  
lift it or

likely cut by later row [161447].

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>TEA16 - A14 | Area/Field | Sub area/Trench          | Context number<br>161444                                                                                               |
| ECR #                    | Subgroup   | Parent context<br>161444 | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |        |  |  |                     |
|--|--|--------|--|--|---------------------|
|  |  | 161443 |  |  | Same as context     |
|  |  | 161444 |  |  | Cuts context 161444 |
|  |  | 161445 |  |  | 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 checked="" type="checkbox"/> <i>SEM</i><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N<br>                                                                                                                                 | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b><br>0.10- | <b>Diameter</b><br>0.46- |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <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 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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 16217-6 16219                                                                                            |
|            |           | 1610859 to 1610861 | Surveyed: S#26                                                                                                       |
|            |           | 1610865-6          | plan <input checked="" type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date 31/1/18                                                                                       |
| Initials SRS                                                                                       |
| Checked by                                                                                         |

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

# ADDITIONAL INFORMATION

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

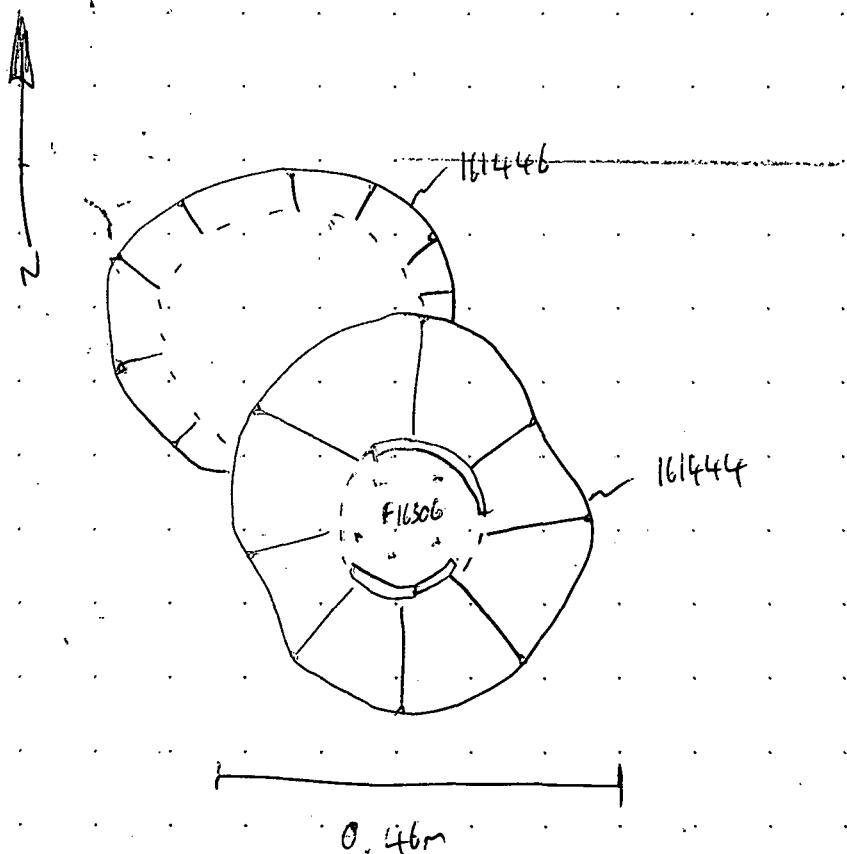
Cremation pit cut. Pit found with, F16306,  
wrapped at left.

Cutting across possible cremation [161446] to North

Refer to context

## SKETCHES

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







|                                 |            |                                 |                                                                                                                        |
|---------------------------------|------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>TEA 16 - A4</b> | Area/Field | Sub-area/Trench                 | Context number<br><b>161445</b>                                                                                        |
| ECB #                           | Subgroup   | Parent context<br><b>161446</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161444</b> |  |  | Same as context |
|  |  | <b>161445</b> |  |  | Cuts context    |
|  |  | <b>161446</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 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<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 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 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**

|                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| <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 checked="" 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 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"/> | 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"/> |                          |
| <b>Thickness</b>                                                                                                                                                 | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                          |                          |
| 0.13 m max <b>HA2</b>                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                          |
| <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* <b>TELEPHONED</b><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                                                                                                                                                                                                                                                                                                               | other* <input checked="" type="checkbox"/> <b>from 10 CHARBOK</b>                                                                                                                                                                                                                                                                                        |                          |
| frequency                                                                                                                                                        | O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | F                                                                                                                                                                                                                                                                                                                                                        | O                        |
| bulk find                                                                                                                                                        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> |

|                                                              |
|--------------------------------------------------------------|
| <input type="checkbox"/> topsoil                             |
| <input type="checkbox"/> subsoil                             |
| <input type="checkbox"/> geological subsoil                  |
| <input type="checkbox"/> remnant topsoil                     |
| <input type="checkbox"/> surface                             |
| <input type="checkbox"/> occupation layer                    |
| <input 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 checked="" type="checkbox"/> cremation                |
| <input type="checkbox"/> other fill/deposit (describe below) |

**CROSS REFERENCE**

|                             |                       |                             |                                                                                                                                                                   |
|-----------------------------|-----------------------|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>S16210</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610867</b> | Drawing nos<br><b>1628</b><br>Surveyed: <b>S# 28</b><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|-----------------------------|-----------------------|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                       |                                                                         |
|---------------------------------------|-------------------------------------------------------------------------|
| <b>Basic process</b>                  |                                                                         |
| construction <input type="checkbox"/> | use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date                                  | <b>02/02/18</b>                                                         |
| Initials                              | <b>shid</b>                                                             |
| Checked by                            |                                                                         |



# ADDITIONAL INFORMATION

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

DARK BROWNISH BACKFILL OF SUBCIRCULAR CREMATIONS CUT. MAINLY COMPOSED BY CHARCOAL AND BURNING MATERIALS.

SPORADIC SMALL FRAGMENTED BONES AND SMALL PEBBLES

NO DATING EVIDENCES, NO VESSEL FOUND

CUT BY LATER CREMATION [161666]

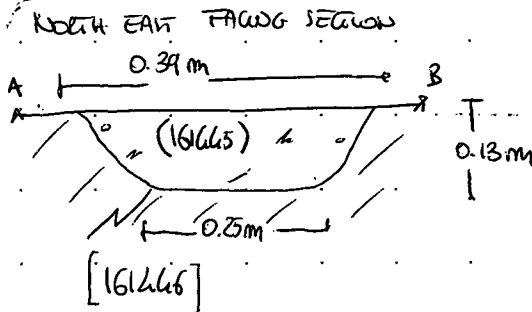
POSSIBLY CUT BY LATER REW [161667]

Refer to context

161666

## SKETCHES

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



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                             |                                 |                                                                                                                        |
|-------------------------|-----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A12</b> | Area/Field<br><b>TBA 16</b> | Sub-area/trench                 | Context number<br><b>161446</b>                                                                                        |
| ECB #                   | Subgroup                    | Parent context<br><b>161446</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161445</b> |  |  | Same as context |
|  |  | <b>161446</b> |  |  | Cuts context    |
|  |  | <b>161448</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 checked="" type="checkbox"/></p> <p><b>Cemented cut</b></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>N <b>NOT APPLICABLE</b>                                                                                                        | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input checked="" type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                             |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b><br><b>0.45</b>                                                                                                                                                                                                                                                             | <b>Width</b><br><b>0.35</b>                                                                                                                                                                                                                  | <b>Depth</b><br><b>0.14</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"/> | <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"/> | <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> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td></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

|             |            |                    |                                                                                                                                             |
|-------------|------------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos. | Finds nos. | Photo nos.         | Drawing nos.                                                                                                                                |
| /           | /          | 1610872<br>1610873 | 516219<br>Surveyed <b>5/28</b><br>plan <input checked="" type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>02/02/18</b>                                                                                          |
| Initials <b>SLM</b>                                                                                           |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

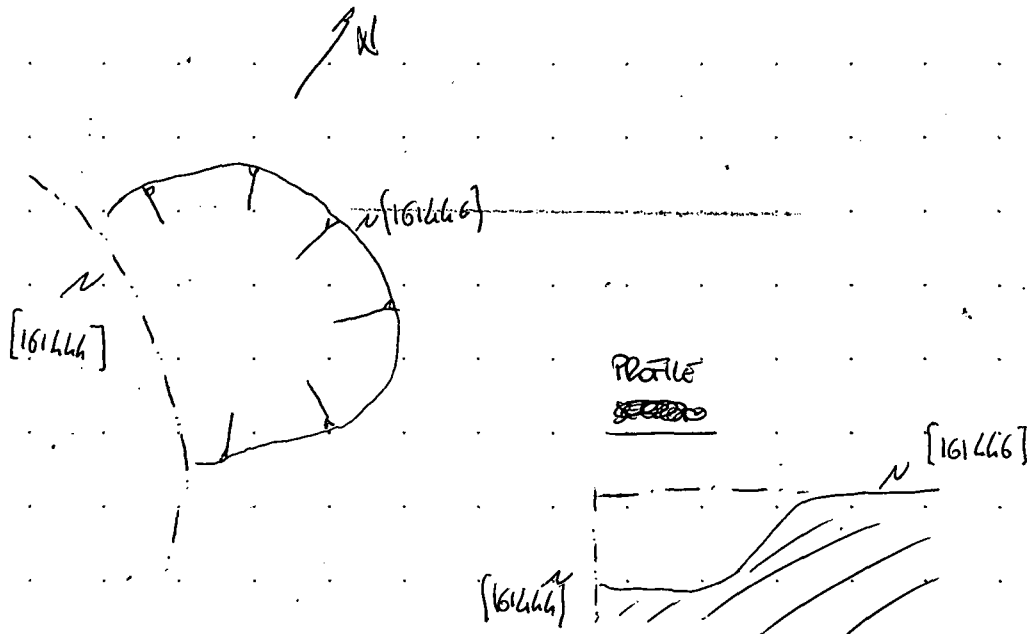
(any further details that may be important for understanding the context, including items marked \* overleaf)

SUB CIRCULAR W/ OF CREMATION PT, LAYING W/ THE RIGS BARROW  
ENCLOSURE TRUNCATED BY CREMATION PIT [161466] ON THE SOUTH EAST SIDE  
ONE OF SEVERAL CREMATIONS DETECTED IN CLOSE PROXIMITY  
NO OTHER EVIDENCES.

Refer to context

## SKETCHES

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





|                         |                            |                                 |                                                                                                                        |
|-------------------------|----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>ALC</b> | Area/Field<br><b>TEA16</b> | Sub area/Trench                 | Context number<br><b>161447</b>                                                                                        |
| ECB #                   | Subgroup                   | Parent context<br><b>161447</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |               |               |                 |
|--|--|---------------|---------------|-----------------|
|  |  | <b>161623</b> |               | Same as context |
|  |  | <b>161447</b> |               | Cuts context    |
|  |  | <b>161624</b> | <b>161655</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 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 type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          | <b>Sides</b><br>[ <input type="checkbox"/> vertical<br>[ <input type="checkbox"/> steep<br>[ <input type="checkbox"/> moderate<br>[ <input type="checkbox"/> gentle<br>[ <input type="checkbox"/> stepped<br>[ <input type="checkbox"/> undercutting<br>[ <input type="checkbox"/> complex* | <b>Base</b><br>- <input type="checkbox"/> flat<br>C <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>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><br>4.80                                                                                                                                                                                                                                                                       | <b>Width</b><br>4.80                                                                                                                                                                                                                          | <b>Depth</b><br>— | <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>                                                                                                                                                           | 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"/>                                                                                                                     | frequency <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

**CROSS REFERENCE**

|             |            |                        |                                                                                                                                       |
|-------------|------------|------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos. | Finds nos. | Photo nos.             | Drawing nos.                                                                                                                          |
|             |            | 161032-34<br>161040-42 | 16298 H35<br>16299 H36<br>16300 H37<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |

**Basic process**

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>23/2/18</b>                                                                                           |
| Initials <b>SR</b>                                                                                            |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

Possible later cut/he-cut into the  
ray ditch associated with a  
prehistoric round barrow

Refer to context

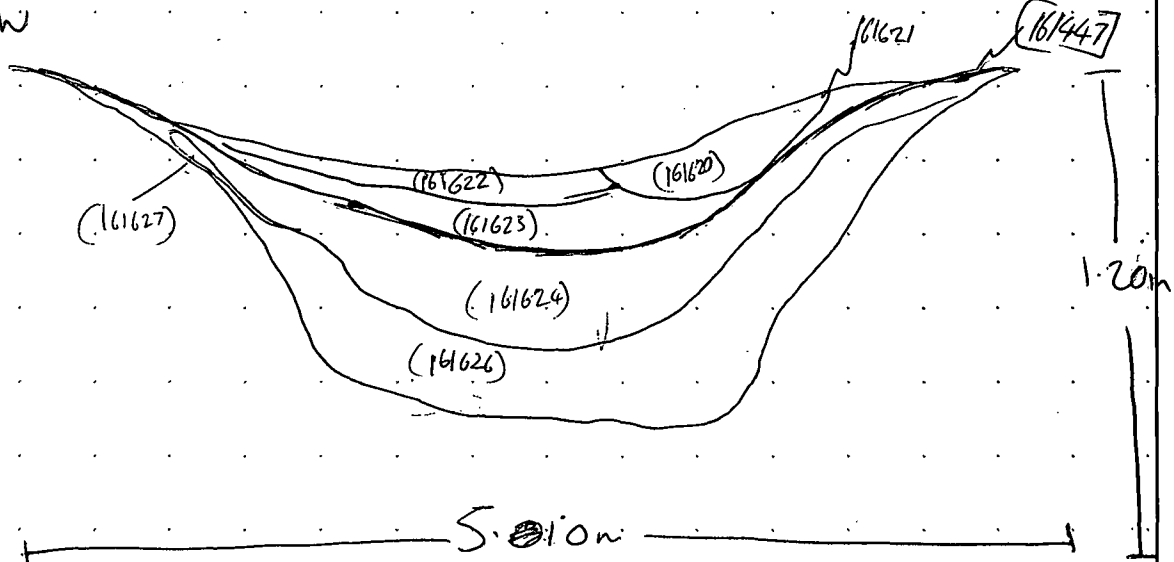
## SKETCHES

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

D1629.8

NW

SE



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                             |                                                                                                                                   |
|-------------------------|-----------------------------|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>/</b> | Context number<br><b>(161448)</b>                                                                                                 |
| ECB#<br><b>/</b>        | Subgroup<br><b>/</b>        | Parent context<br><b>/</b>  | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|             |             |                     |          |                |                 |
|-------------|-------------|---------------------|----------|----------------|-----------------|
| 161439, 441 | 161444, 446 | <del>(161447)</del> | [161437] | 161480, 82, 84 | Same as context |
|             |             | (161448)            |          |                | Cuts context    |
|             |             | 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 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>I <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                                                                                                                                                                                                                                                               |  | 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 type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input checked="" type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input 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>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                     |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                             | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                      | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## CROSS REFERENCE

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

## Basic process

|                                       |                              |                                            |
|---------------------------------------|------------------------------|--------------------------------------------|
| construction <input type="checkbox"/> | use <input type="checkbox"/> | disuse <input checked="" type="checkbox"/> |
| Date                                  | 31/01/18                     |                                            |
| Initials                              | SMH                          |                                            |
| Checked by                            |                              |                                            |

# ADDITIONAL INFORMATION

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

BACKFILL DEPOSIT ASSOC. WITH OUTER DIRT  
OF BARROW.

APPEARS TO BE CUT BY SEVERAL CREMATION  
BURIALS.

PRIMARILY SEALED BY (161447) - THIS IS ALSO  
SEALING CREMATIONS

A FAIRLY MIXED MATERIAL, BUT NOTABLE DIFFERENCE  
TO (161447), DUE TO THE YELLOWISH COLOUR  
OF THE DEPOSIT

Refer to context

(161448)

## SKETCHES

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





|                          |                             |                                   |                                                                                                                        |
|--------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench                   | Context number<br><b>(161449)</b>                                                                                      |
| ECB#                     | Subgroup                    | Parent context<br><b>[161450]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |                 |  |  |                 |   |
|--|--|-----------------|--|--|-----------------|---|
|  |  |                 |  |  | Same as context | / |
|  |  | <b>(161449)</b> |  |  | Cuts context    | / |
|  |  | <b>[161450]</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>H <input type="checkbox"/> E-W<br>↗ <input type="checkbox"/> NE-SW<br>↘ <input type="checkbox"/> NW-SE<br>N                                                                                                                          | <b>Sides</b><br>1 <input type="checkbox"/> vertical<br>2 <input type="checkbox"/> steep<br>3 <input type="checkbox"/> moderate sloping<br>4 <input type="checkbox"/> gentle<br>5 <input type="checkbox"/> stepped<br>6 <input type="checkbox"/> undercutting<br>7 <input type="checkbox"/> complex* | <b>Base</b><br>1 <input type="checkbox"/> flat<br>2 <input type="checkbox"/> concave<br>3 <input type="checkbox"/> v-shaped<br>4 <input type="checkbox"/> sloping<br>5 <input type="checkbox"/> uneven<br>6 <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 | 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 checked="" type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><b>0.16</b>                                                                                                                                                                                                                  | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency<br>bulk find                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

**CROSS REFERENCE**

|                             |                |                                     |                                                                                                                                                                    |
|-----------------------------|----------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>516213</b> | Finds nos<br>/ | Photo nos<br><b>1610810-1610811</b> | Drawing nos <b>16216</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>S# 14</b> |
|-----------------------------|----------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Basic process**

construction ☐ use ☒ disuse ☐

|            |                |
|------------|----------------|
| Date       | <b>31.1.18</b> |
| Initials   | <b>CV</b>      |
| Checked by |                |

# ADDITIONAL INFORMATION

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

## FILL OF POSSIBLE CREMATION

IT WAS MODERATELY COMPACT WITH A BROWN-GREYISH COLOR AND A CLAY-SILTY TEXTURE

THERE WAS A MODERATELY PRESENCE OF CHARCOAL AND OCCASIONAL TRACES OF PLANT REMAINS (ROOTS)

NO FINDS

Refer to context 161450

## SKETCHES

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

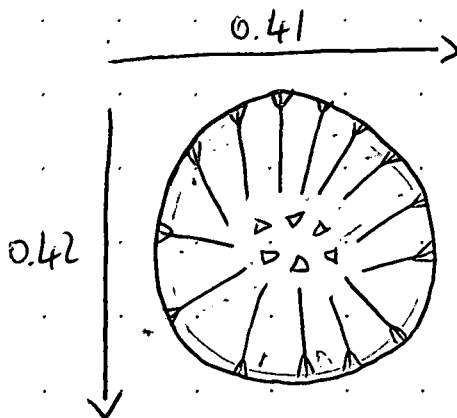
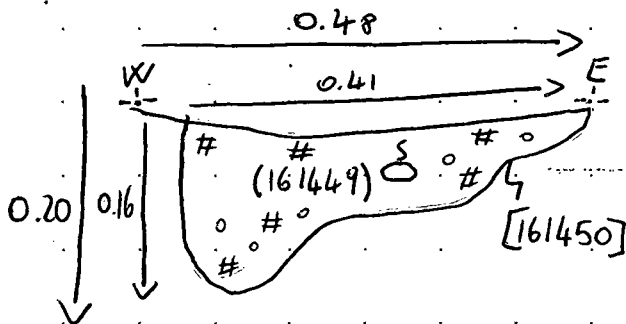
## SKETCHING SECTION OF POSSIBLE CREMATION

### KEY

S=STONE

O=STONE

#=CHARCOAL



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub area/Trench                   | Context number<br><b>[161450]</b>                                                                                      |
| ECB#                    | Subgroup                    | Parent context<br><b>[161450]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161449)</b> |  |  | Same as context |
|  |  | <b>[161450]</b> |  |  | Cuts context    |
|  |  |                 |  |  | Cut by context  |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input 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 checked="" 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 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>0.16</b> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Diameter</b><br><b>0.41</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"/>                                      |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

## POSSIBLE CREMATION

## 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |                |           |              |                |      |              |       |     |                |                 |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <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</td> <td>CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | stones*   | chalk    | iron pan       | manganese | charcoal     | plant remains* | wood | marine shell | bone* | pot | fired clay     | CBM             | CTP   | mortar/plaster | leather/textile  | glass   | metal        | industrial waste | lithics | coarse stone |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | iron pan                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | manganese | charcoal | plant remains* | wood      | marine shell | bone*          | pot  | fired clay   | CBM   | CTP | mortar/plaster | leather/textile | glass | metal          | industrial waste | lithics | coarse stone |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |                |           |              |                |      |              |       |     |                |                 |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>frequency</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |                |           |              |                |      |              |       |     |                |                 |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>bulk find</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |                |           |              |                |      |              |       |     |                |                 |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

## CROSS REFERENCE

|                        |                       |                                          |                                                                                                                                                                       |
|------------------------|-----------------------|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>/</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610810~<br/>1610811</b> | Drawing nos<br><b>16216</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>S# 14</b> |
|------------------------|-----------------------|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>31.1.18</b>                                                                                           |
| Initials <b>CV</b>                                                                                            |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

## CUT OF POSSIBLE CREMATION.

IT ~~WAS~~ HAD A CIRCULAR SHAPE WITH STEEP SIDE AND CONCAVE BASE.

IT WAS CLOSE TO ANOTHER POSSIBLE CREMATION, WHILE, A LITTLE FURTHER SOUTH, THERE WAS OTHER FOUR CREMATION, OF WHICH ONE IN VESSEL.

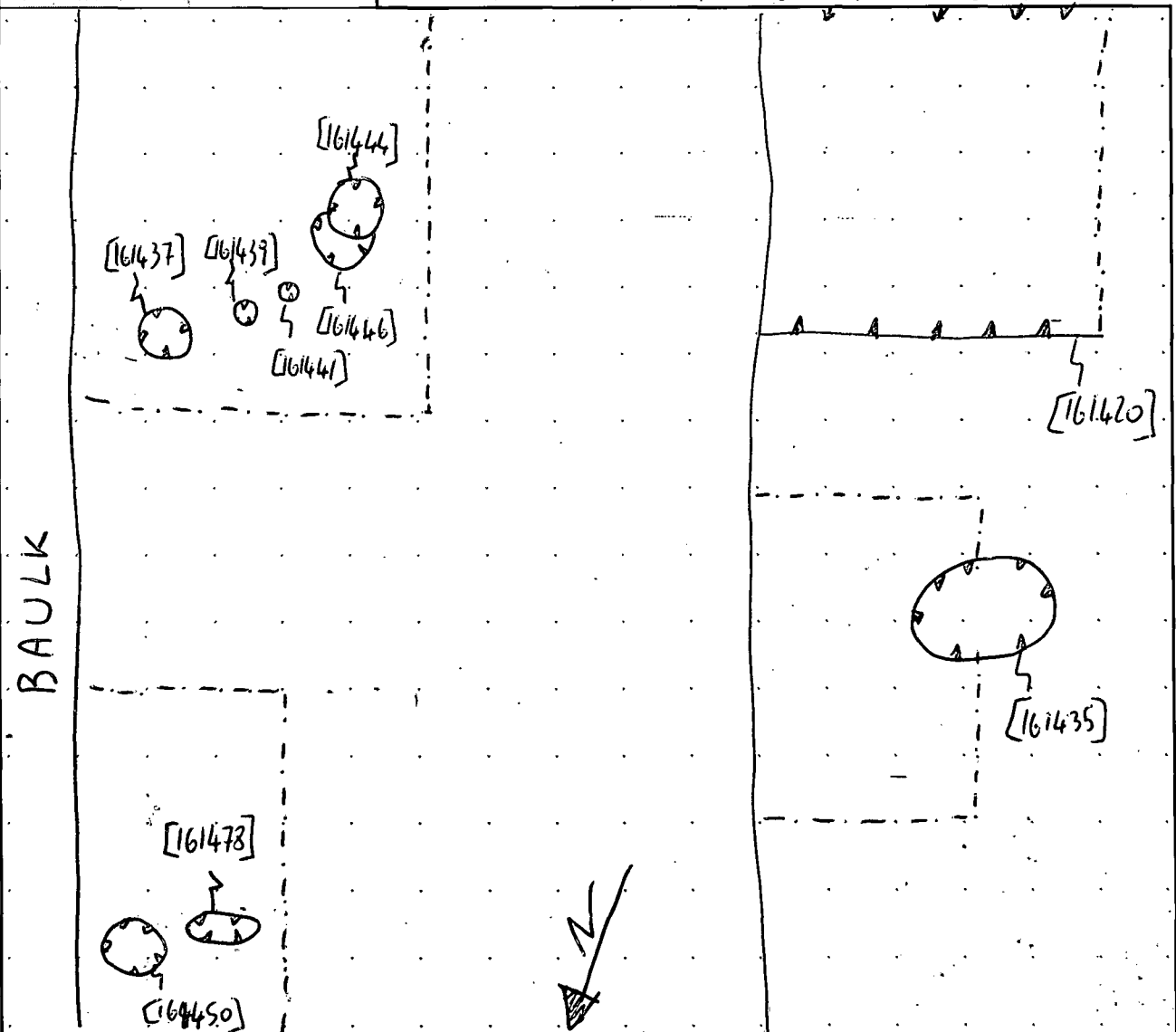
AT WEST THERE WAS OTHER CREMATION. EVEN IF THEM WERE AT A LOWER STRATIGRAPHIC LEVEL

Refer to context

161449

## 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 16</b> | Sub-area/Trench<br><b>TEA 15 BARROW</b> | Context number<br><b>161451</b>                                                                                        |
| ECB#                    | Subgroup                    | Parent context<br><b>[161400]</b>       | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                |  |  |                 |
|--|--|----------------|--|--|-----------------|
|  |  | <b>(16002)</b> |  |  | Same as context |
|  |  | <b>161451</b>  |  |  | Cuts context    |
|  |  | <b>161400</b>  |  |  | Cut by context  |

## CUT

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

## DESCRIPTION

## INTERPRETATION

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

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Compaction                                                                                                                                            | Colour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Composition                                                                                                                                                                                                                                                                                                                                   | <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) |
| <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 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<br><b>0.2m</b>                                                                                                                              | Inclusions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| bulk find                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|                         |                        |                                                |                                                                                                                                                                   |
|-------------------------|------------------------|------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos.<br><b>X</b> | Finds nos.<br><b>X</b> | Photo nos.<br><b>1610731</b><br><b>1610732</b> | Drawing nos.<br>Surveyed: <b>16255</b><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>123</b> |
|-------------------------|------------------------|------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>31/1/18</b>                                                                                           |
| Initials <b>2H</b>                                                                                            |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

FILL OF TREE BOWL [161400]

Refer to context [161400]

## SKETCHES

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



# MOLA HEADLAND INFRASTRUCTURE



AFRM16  
A14 TEA16  
ECB5052

## CONTEXT SHEET

|                         |                            |                                          |                                                                                                             |
|-------------------------|----------------------------|------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA 15 - BAVOL</b> | Context number<br><b>161452</b>                                                                             |
| ECB #                   | Subgroup                   | Parent context<br><b>-</b>               | Context type<br>cut <input 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 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>                                                                                                                                                                                                                                                                                       | <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 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>bluish <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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |                |           |              |                |      |                  |       |         |                  |       |         |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <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>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></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   | plaster | leather/textile  | glass   | metal        | industrial waste | lithics | coarse stone |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| stones*                                                                                                                                                                    | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | iron pan                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | manganese | charcoal | plant remains* | wood      | marine shell | bone*          | pot  | fired clay / CBM | CTP   | plaster | leather/textile  | glass | metal   | industrial waste | lithics | coarse stone |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |                |           |              |                |      |                  |       |         |                  |       |         |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>frequency</b>                                                                                                                                                           | bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |                |           |              |                |      |                  |       |         |                  |       |         |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |                |           |              |                |      |                  |       |         |                  |       |         |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

### CROSS REFERENCE

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

### Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date                                                                                               |
| Initials                                                                                           |
| Checked by                                                                                         |



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

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

## SKETCHES

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

[illegible]

## CONTEXT SHEET

|                  |                      |                                  |                                                                                                             |
|------------------|----------------------|----------------------------------|-------------------------------------------------------------------------------------------------------------|
| Site code<br>A14 | Area/Field<br>TEA-16 | Sub-area/Trench<br>TEA15-Barrack | Context number<br>161453                                                                                    |
| ECB #            | Subgroup             | Parent context                   | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

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

**CUT**

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"/> line <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 sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                             | <b>Length</b>                                                                                                                                                                                                                                                                         | <b>Width</b>                                                                                                                                                                                                                      | <b>Depth</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                     |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

**FILL/DEPOSIT**

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

### DESCRIPTION

### INTERPRETATION

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

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                                                                                                 |
|------------|-----------|-----------|-------------------------------------------------------------------------------------------------------------|
|            |           |           | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |

|                                                                                                                            |  |
|----------------------------------------------------------------------------------------------------------------------------|--|
| <b>Basic process</b><br>construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |  |
| <b>Date</b>                                                                                                                |  |
| <b>Initials</b>                                                                                                            |  |
| <b>Checked by</b>                                                                                                          |  |

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

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

## 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>TRA 16</b> | Sub area/trench<br><b>TRA 15 - 04926w</b> | Context number<br><b>161454</b>                                                                                        |
| ECB#                    | Subgroup                    | Parent context<br><b>161455</b>           | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>160002</b> |  |  | Same as context |
|  |  | <b>161454</b> |  |  | Cuts context    |
|  |  | <b>161455</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 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 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>2 <input type="checkbox"/> steep<br>3 <input checked="" type="checkbox"/> moderate sloping<br>4 <input type="checkbox"/> gentle<br>5 <input type="checkbox"/> stepped<br>6 <input type="checkbox"/> undercutting<br>7 <input type="checkbox"/> complex* | <b>Base</b><br>1 <input type="checkbox"/> flat<br>2 <input checked="" type="checkbox"/> concave<br>3 <input type="checkbox"/> v-shaped<br>4 <input type="checkbox"/> sloping<br>5 <input type="checkbox"/> uneven<br>6 <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 <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>0.48</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>                                                                                                                                                                    | stones* <input type="checkbox"/><br>chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/><br>manganese <input type="checkbox"/><br>charcoal <input checked="" 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"/> <input type="checkbox"/>                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |                                      |                                                                                                                                                                     |
|------------|-----------|--------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos<br><b>101-0067<br/>-69</b> | Drawing nos <b>S/ 23</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16258</b> |
|------------|-----------|--------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>31/1/18</b>                                                                                |
| Initials <b>LE</b>                                                                                 |
| Checked by                                                                                         |

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

# ADDITIONAL INFORMATION

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

FILL OF TREE BOLE WITH CHARCOAL  
REMNANTS OF TREE ROOT VISIBLE IN  
SECTION

Refer to context | 161454

## SKETCHES

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

SEE [161455]

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                        |                                                                                                                        |
|-------------------------|----------------------------|----------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEAIS</b> | Sub area/trench<br><b>TEAIS-BALLUW</b> | Context number<br><b>161455</b>                                                                                        |
| ECB #                   | Subgroup                   | Parent context<br><b>161455</b>        | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161454</b> |  |  | Same as context |
|  |  | <b>161455</b> |  |  | Cuts context    |
|  |  | <b>161453</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"/> |  |                                                                                                                                                                                                                                                                                                                |                              |                                                                                                                                                                                                                                                          | <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 checked="" type="checkbox"/></p> <p><b>TREE BOLE</b></p> |
| <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<br>▲                                                                                                                     |  | <b>Sides</b><br>] <input type="checkbox"/> vertical<br>] <input type="checkbox"/> steep<br>] <input checked="" type="checkbox"/> moderate sloping<br>] <input type="checkbox"/> gentle<br>] <input type="checkbox"/> stepped<br>] <input type="checkbox"/> undercutting<br>] <input type="checkbox"/> complex* |                              | <b>Base</b><br>— <input type="checkbox"/> flat<br>— <input checked="" type="checkbox"/> concave<br>— <input type="checkbox"/> v-shaped<br>— <input type="checkbox"/> sloping<br>— <input type="checkbox"/> uneven<br>— <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          |  | <b>Length</b><br><b>3.70m</b>                                                                                                                                                                                                                                                                                  | <b>Width</b><br><b>0.78m</b> | <b>Depth</b><br><b>0.48m</b>                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Shape result of (tick all that apply)</b><br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input checked="" type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                                                |                              |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Shape result of (tick all that apply)</b><br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input checked="" 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"/> |                | <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> |         |              |          |           |                 |                |                |                 |       |       |                  |         |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |       | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                                                                                                                                                                                                                                                                                                                                                          |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |         |              |          |           |                 |                |                |                 |       |       |                  |         |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                                                                                                                                                                                                                                                                                                                                                          |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |         |              |          |           |                 |                |                |                 |       |       |                  |         |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay/ CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>bulk find</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                                                                                                                                                                                                                                                                                                                                                          |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | stones* | chalk        | iron pan | manganese | charcoal        | plant remains* | wood           | marine shell    | bone* | pot   | fired clay/ CBM  | CTP     | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone | frequency |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | bulk find |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | chalk | iron pan                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | manganese | charcoal                                                                                                                                                                                                                                                                                                                                                 | plant remains* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | wood    | marine shell | bone*    | pot       | fired clay/ CBM | CTP            | mortar/plaster | leather/textile | glass | metal | industrial waste | lithics | coarse stone   |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| frequency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                                                                                                                                                                                                                                                                                                                                                          |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |         |              |          |           |                 |                |                |                 |       |       |                  |         |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                                                                                                                                                                                                                                                                                                                                                          |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |         |              |          |           |                 |                |                |                 |       |       |                  |         |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                                                                                                                                                                                                                                                                                                                                                          |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |         |              |          |           |                 |                |                |                 |       |       |                  |         |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

## CROSS REFERENCE

|            |           |                                                                                                                                         |             |
|------------|-----------|-----------------------------------------------------------------------------------------------------------------------------------------|-------------|
| Sample nos | Finds nos | Photo nos                                                                                                                               | Drawing nos |
|            |           | 101-0067<br>-69                                                                                                                         | SH 23       |
|            |           | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16258</b> |             |

## Basic process

|                                                  |                              |                                 |
|--------------------------------------------------|------------------------------|---------------------------------|
| construction <input checked="" type="checkbox"/> | use <input type="checkbox"/> | disuse <input type="checkbox"/> |
| Date                                             | 31/1/18                      |                                 |
| Initials                                         | LE                           |                                 |
| checked by                                       |                              |                                 |

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

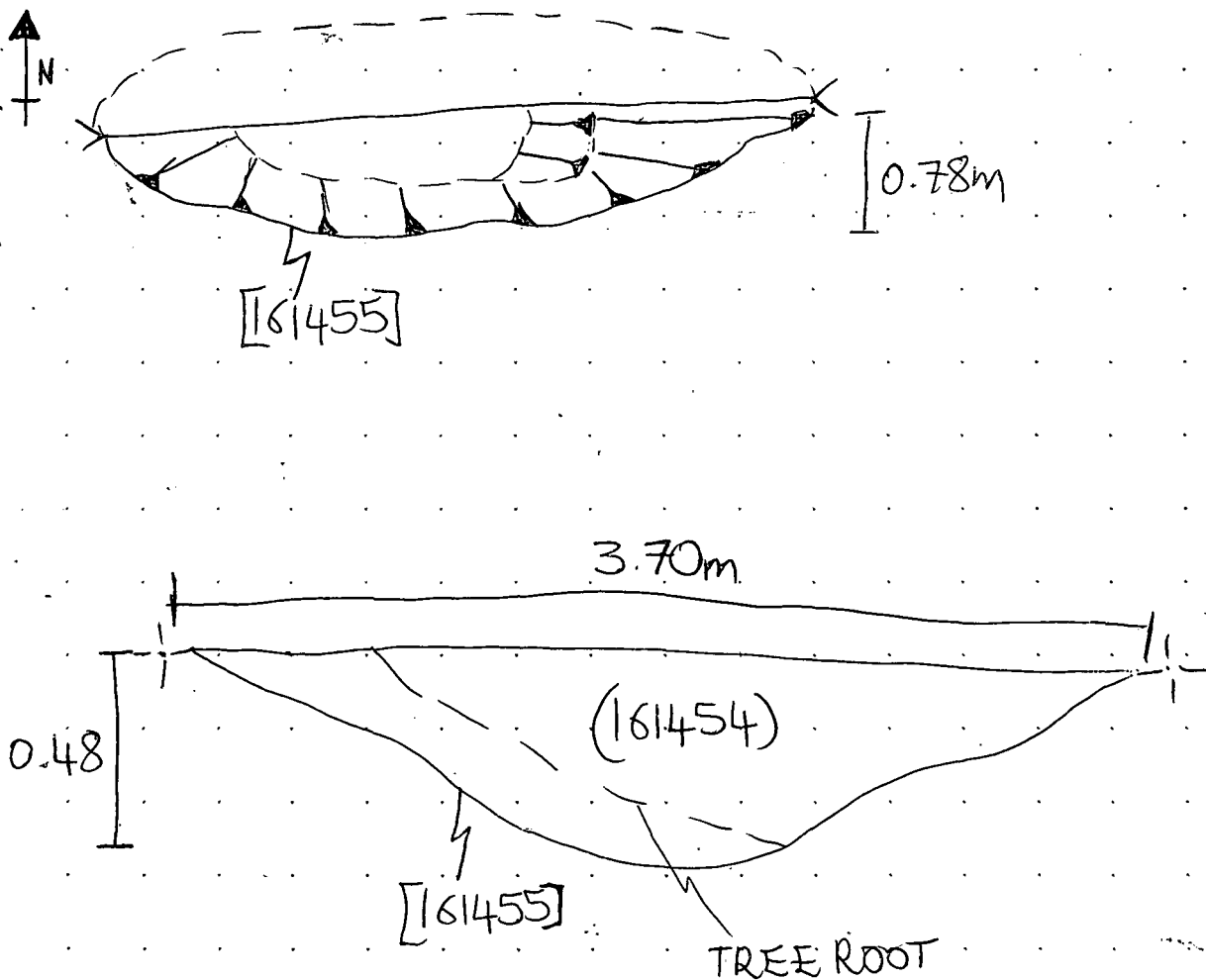
## CUT OF TREE BOLE

Refer to context

161455

SKETCHES

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



SOUTH FACING SECTION OF TREE BOLE



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                         |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15 - BAR 2</b> | Context number<br><b>(161456)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>[161458]</b>       | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(160002)</b> |  |  | Same as context |
|  |  | <b>(161456)</b> |  |  | Cuts context    |
|  |  | <b>(161457)</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 checked="" type="checkbox"/>                                                                                      | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of:</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                      |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

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

## CROSS REFERENCE

|                               |                                  |                                                                  |                                                                                                                                                                            |                                                                                                                                                  |
|-------------------------------|----------------------------------|------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Sample nos</b><br><b>X</b> | <b>Finds nos</b><br><b>16310</b> | <b>Photo nos</b><br><b>1610734</b><br><b>1</b><br><b>1610736</b> | <b>Drawing nos</b> <b>2/23</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D-16289</b> | <b>Basic process</b><br>construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|                               |                                  |                                                                  |                                                                                                                                                                            | Date <b>1/2/18</b>                                                                                                                               |
|                               |                                  |                                                                  |                                                                                                                                                                            | Initials <b>JW</b>                                                                                                                               |
|                               |                                  |                                                                  |                                                                                                                                                                            | Checked by                                                                                                                                       |

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

# ADDITIONAL INFORMATION

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

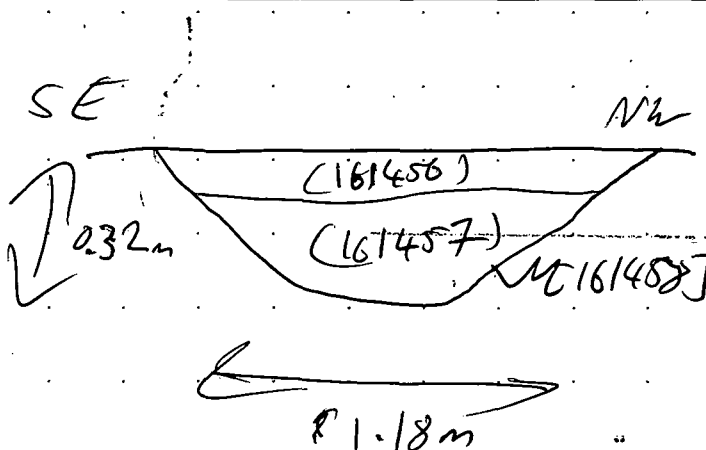
UPPER FILL OF DITCH [161458], ~~SE~~ Homogeneous STRONG  
FILL CONTAINING A FLAKE OF WORKED FLINT AND NO DATABLE  
FINDS.

POSSIBILITY THAT A PORTION OF THIS FILL HAS BEEN LOST  
TO OVER MACHINING, PLOUGHING OR BOTH.

Refer to context

## SKETCHES

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



## STRATIGRAPHY

|  |  |           |  |  |                 |
|--|--|-----------|--|--|-----------------|
|  |  | (161 456) |  |  | Same as context |
|  |  | (161 457) |  |  | Cuts context    |
|  |  | [161 458] |  |  | 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><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                 | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="margin-left: 10px;">           sloping         </div> </div> |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |              |                                                                                                                                                                                                                                   |                 |

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

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

### 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"/><br><input type="checkbox"/> brownish <input checked="" type="checkbox"/> brown<br><input type="checkbox"/> greyish <input checked="" type="checkbox"/> grey<br><input type="checkbox"/> orangeish <input type="checkbox"/> orange<br><input type="checkbox"/> yellowish <input type="checkbox"/> yellow<br><input type="checkbox"/> reddish <input type="checkbox"/> red<br><input type="checkbox"/> blueish <input type="checkbox"/> blue | <input type="checkbox"/> clayey <input checked="" type="checkbox"/>                                                    | <input type="checkbox"/> clay            | <input type="checkbox"/> topsoil <input checked="" type="checkbox"/>            | <input type="checkbox"/> subsoil <input checked="" type="checkbox"/>             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> moderately compact                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> silty <input type="checkbox"/>                                                                | <input checked="" type="checkbox"/> silt | <input type="checkbox"/> geological subsoil <input checked="" type="checkbox"/> | <input type="checkbox"/> remnant topsoil <input checked="" type="checkbox"/>     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input checked="" type="checkbox"/> loose                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input checked="" type="checkbox"/> sandy <input type="checkbox"/>                                                     | <input type="checkbox"/> sand            | <input type="checkbox"/> surface <input checked="" type="checkbox"/>            | <input type="checkbox"/> occupation layer <input checked="" type="checkbox"/>    |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> friable                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> gravelly <input type="checkbox"/>                                                             | <input type="checkbox"/> gravel          | <input type="checkbox"/> dumped layer <input checked="" type="checkbox"/>       | <input type="checkbox"/> deliberate backfill <input checked="" type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> peaty <input type="checkbox"/>                                                                | <input type="checkbox"/> peat            | <input type="checkbox"/> destruction debris <input checked="" type="checkbox"/> | <input type="checkbox"/> bedding layer <input checked="" type="checkbox"/>       |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/> |                                          | <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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                        |                                          |                                                                                 |                                                                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 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"/> | <input type="checkbox"/> |

other fill/deposit (describe below)

☐ natural infilling ☒  
☐ colluvial layer ☒  
☐ in situ burning ☒  
☐ post-pipe ☒  
☐ packing ☒  
☐ cremation ☒

### 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"/> |
| α          | α        | 1610734<br>1<br>1610736 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>b 16259 | Date 1/2/17<br>Initials JW<br>Checked by                                                                      |

# ADDITIONAL INFORMATION

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

LOWER PART OF DITCH [161458], HUNDRETHS OF FEET  
 FILL OVERLAIN BY WATER STONE (161456).

FILL PROBABLY THE RESULT OF EROSION OF SOILS AND  
 BASE DUE TO WATER RUNNING DOWN AND POOLING AT BASE.

CONTAINED IN PILES.

Refer to context

## SKETCHES

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

SEE (161456)

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                          |                                                                                                                        |
|-------------------------|----------------------------|------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench<br><b>TEA15 - BAKlow</b> | Context number<br><b>[161458]</b>                                                                                      |
| ECB#                    | Subgroup                   | Parent context<br><b>[161458]</b>        | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>[161458]</b> |  |  | Same as context |
|  |  | <b>[161458]</b> |  |  | Cuts context    |
|  |  | <b>[16003]</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                                                                                                                          |  | <b>Sides</b><br>} <input type="checkbox"/> vertical<br>} <input type="checkbox"/> steep<br>} <input checked="" type="checkbox"/> moderate } sloping<br>} <input type="checkbox"/> gentle<br>} <input type="checkbox"/> stepped<br>} <input type="checkbox"/> undercutting<br>} <input type="checkbox"/> complex* |  | <b>Base</b><br>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><b>2.00m+</b>                                                                                                                                                                                                                                                                                   |  | <b>Width</b><br><b>1.18m</b>                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| <b>Depth</b><br><b>0.32m</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 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

|                        |                       |                                               |                                                                                                                                                                       |
|------------------------|-----------------------|-----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>X</b> | Finds nos<br><b>X</b> | Photo nos<br><b>1610734</b><br><b>1610736</b> | Drawing nos <b>SH 23</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>b. 16259</b> |
|------------------------|-----------------------|-----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>1/2/17</b>                                                                                            |
| Initials <b>JW</b>                                                                                            |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

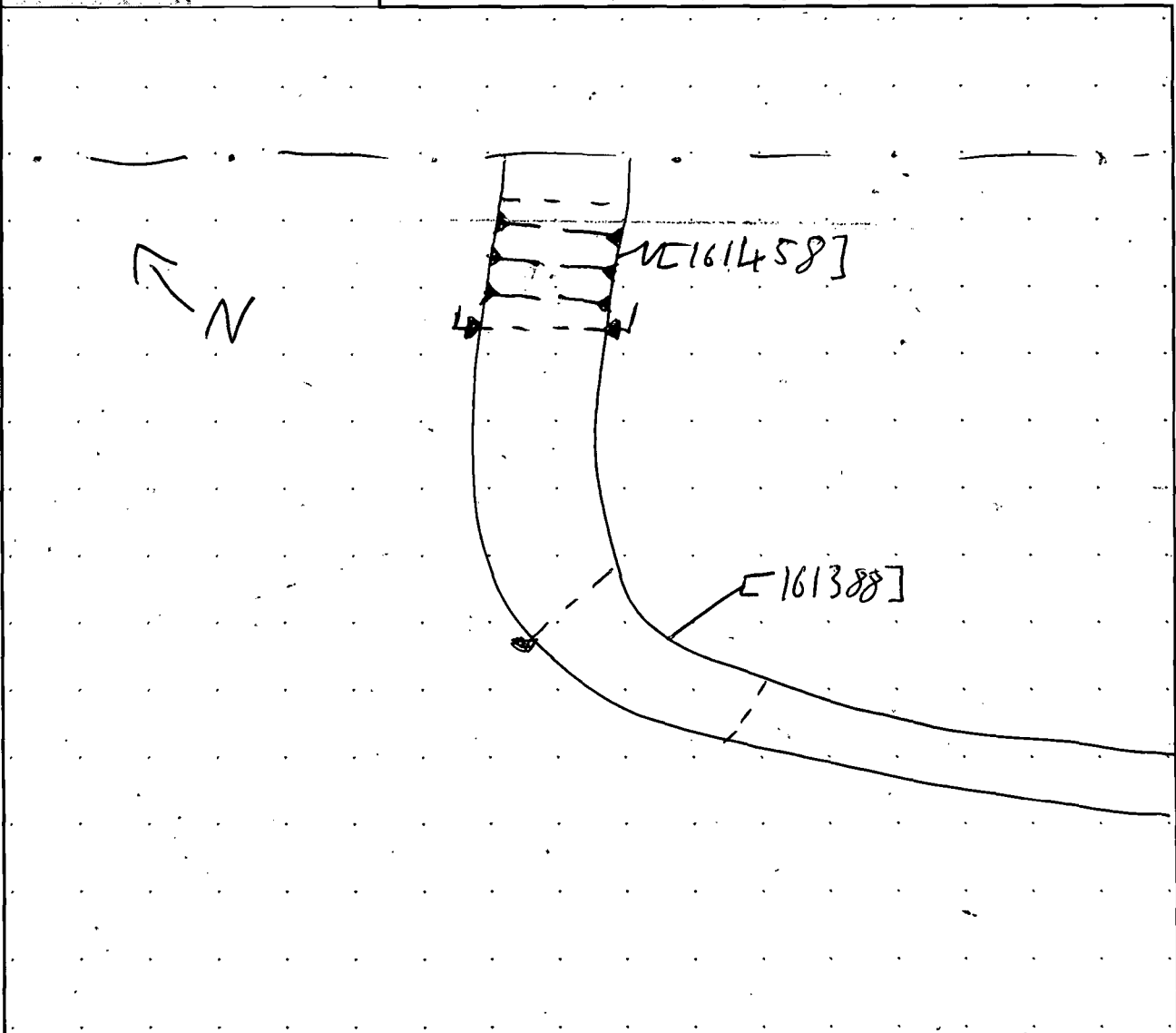
CUT OF SQUARE (NO WOOD LAMERED) ~~ENCLOSURE~~ ENCLOSURE  
DITCH. CONTAINS TWO ~~PHASES~~ PHASES OF SILTING,  
BOTH SIMILAR IN COLOR AND COMPOSITION TO THE OTHER  
SECTIONS DUG IN THE DITCH.

PROFILE IS SHALLOWER THAN OTHER SECTIONS, POSSIBLY DUE  
TO THE NATURAL ~~AND~~ DITCHES AREA BEING HEAVY GRAVEL AS  
OPPOSED TO THE SOFT SILTS IN THE OTHER AREAS.

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 16</b> | Sub-area/Trench                   | Context number<br><b>(161459)</b>                                                                                      |
| ECB #                   | Subgroup                    | Parent context<br><b>[161466]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161462)</b> |  |  | Same as context |
|  |  | <b>(161459)</b> |  |  | Cuts context    |
|  |  | <b>(161460)</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<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                 | <b>Width</b>                                                                                                                                                                                                                      | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                            | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input 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 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, 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*<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                                                                                                 |
|                                                                                                                                       |           |           | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> |
| <b>Basic process</b><br>construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |           |           |                                                                                                             |
| Date: <b>9.2.18</b>                                                                                                                   |           |           |                                                                                                             |
| Initials: <b>FG/RG</b>                                                                                                                |           |           |                                                                                                             |
| Checked by:                                                                                                                           |           |           |                                                                                                             |

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



# ADDITIONAL INFORMATION

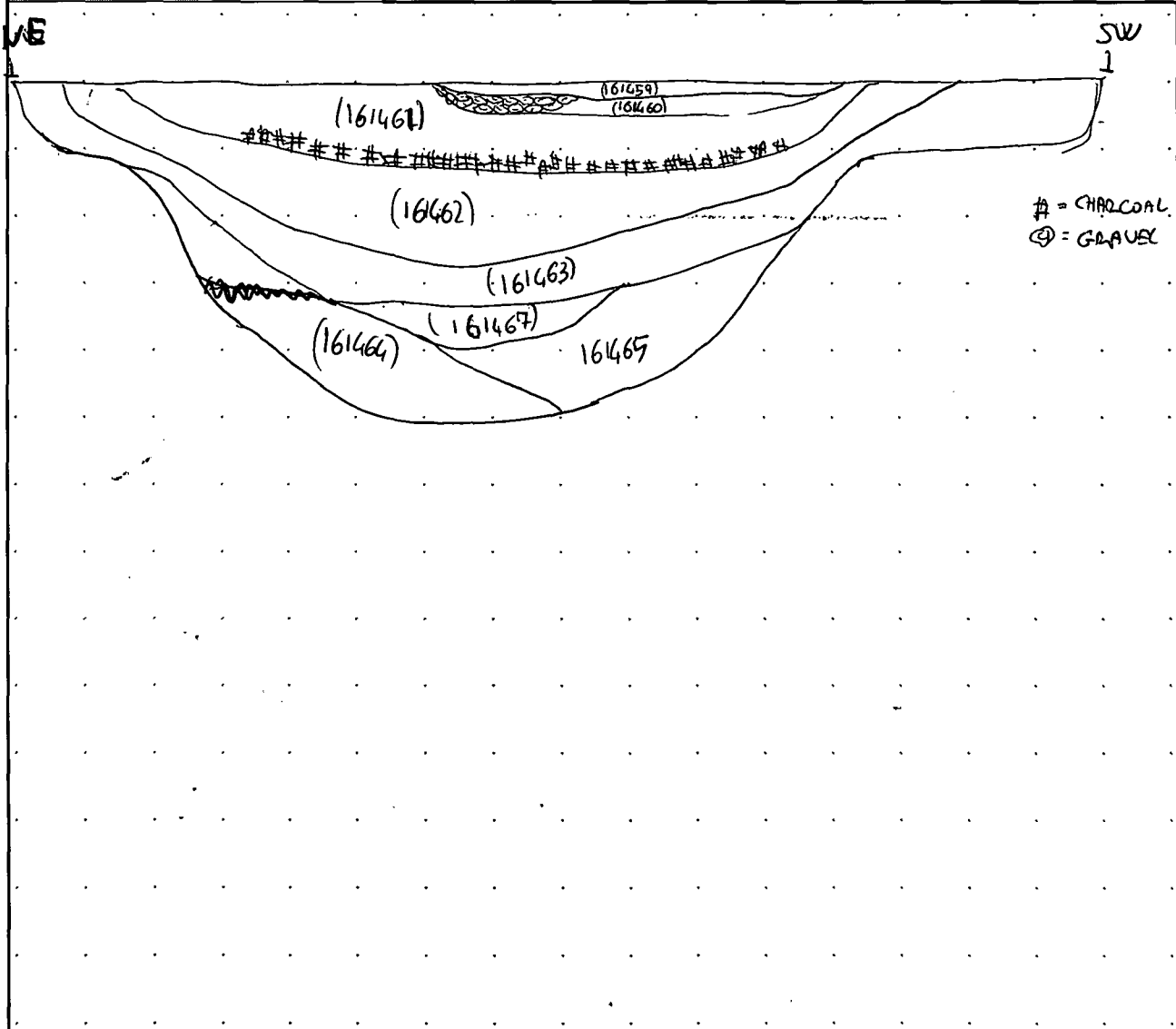
(any further details that may be important for understanding the context, including items marked \* overleaf)

LAYER OF SAND IT CAN BE PART OF THE SUB SOIL  
OR A FILL OF AN IDETICAL PIT.  
THIS FILL IS ONLY PRESENT IN THE SW SECTION OF THE  
SLOT, BUT IT WAS ALSO UNTIL THE 3/4 OF THE SLOT.

Refer to context [161466]

## 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       | 1EA 16     |                 | (161460)                                                                                               |
| ECB#      | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | [161466]        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (61002)  |  |  | Same as context |
|  |  | (161460) |  |  | Cuts context    |
|  |  | (161461) |  |  | 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<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                                                                                                                                                                                                                                                               | Length                                                                                                                                                                                                                                                                        | Width                                                                                                                                                                                                                             | Depth | Diameter |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <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 checked="" 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 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>0.08                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 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<br>bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |                    |                                                                                                                                              |
|------------|-----------|--------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos          | Drawing nos                                                                                                                                  |
| /          | /         | 1610918<br>1610919 | D16261<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>SHEET 28 |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date: 09-02-18                                                                                                |
| Initials: FG                                                                                                  |
| Checked by:                                                                                                   |

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

# ADDITIONAL INFORMATION

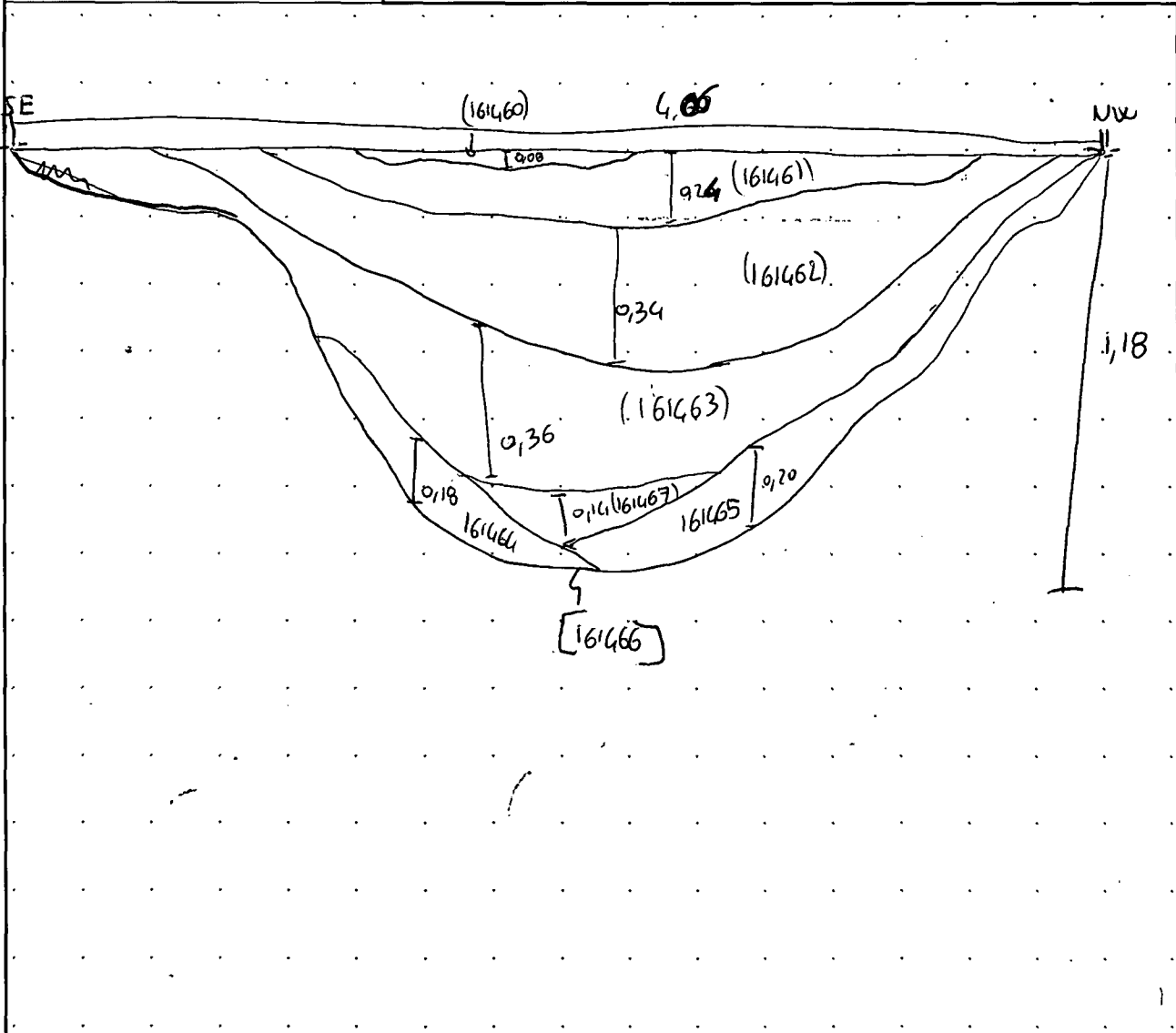
(any further details that may be important for understanding the context, including items marked \*overleaf)

THIN LAYER OF GRAVEL. IT IS UNCLEAR IF IT IS A REMNANT  
 PART OF SUBSOIL OR A LAYER ITSELF

Refer to context (161466)

## SKETCHES

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





|                         |                             |                                 |                                                                                                                        |
|-------------------------|-----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>—</b>     | Context number<br><b>(161461)</b>                                                                                      |
| ECB#<br><b>—</b>        | Subgroup<br><b>—</b>        | Parent context<br><b>161460</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |                 |  |  |                 |          |
|--|--|-----------------|--|--|-----------------|----------|
|  |  | <b>(161460)</b> |  |  | Same as context | <b>—</b> |
|  |  | <b>(161461)</b> |  |  | Cuts context    | <b>—</b> |
|  |  | <b>(161462)</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><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<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 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>0.24 m</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| stones* <input type="checkbox"/> 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<br><b>—</b> | Finds nos<br><b>—</b> | Photo nos<br><b>1610918</b><br><b>1610919</b> | Drawing nos<br><b>JH 28</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16261</b> |
|------------------------|-----------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Basic process**

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>09/01/18</b>                                                                               |
| Initials <b>RG/EG</b>                                                                              |
| Checked by <b>—</b>                                                                                |

# ADDITIONAL INFORMATION

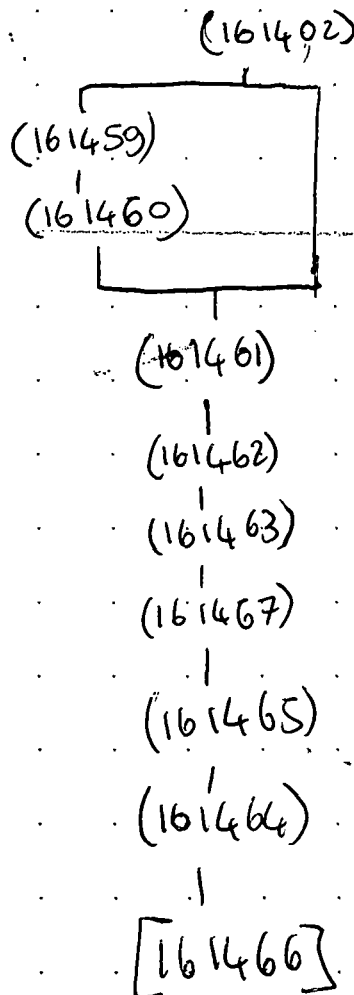
(any further details that may be important for understanding the context, including items marked \* overleaf)

FILL OF DITCH. IN THIS SLOT OF THE ROUND DITCH WE FOUND ~~THE~~ DIGGING A FIRST THIN FILL (161459) (VISIBLE ONLY IN THE SW FAC. SECTION), SECOND LAYER IS A LIME OF STONES (161460) AND THE THIRD FILL IS THIS CONTEXT (161461) THIS IS A NATURAL INFILLING MODERATELY COMPACT WITH A DARK BROWNISH GREY COLOUR AND SILTY CLAY COMPOSITION. THE THICKNESS MAX IS 0.2m. OCCASIONAL FREQUENCY OF CHARCOAL (ESPECIALLY IN THE BASE OF THIS FILL ~~is~~ VISIBLE IN THE SW FAC. SECTION.)  
NO FINDS.

Refer to context (161460) → FOR SECTION

## SKETCHES

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



## STRATIGRAPHY

|  |  |          |  |  |                 |   |
|--|--|----------|--|--|-----------------|---|
|  |  | (161461) |  |  | Same as context | — |
|  |  | (161462) |  |  | Cuts context    | — |
|  |  | (161463) |  |  | 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><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 checked="" 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;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="margin-left: 10px;">         sloping       </div> </div> |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Depth</b> | <b>Diameter</b>                                                                                                                                                                                                                   |
| <b>Shape result of (tick all that apply)</b><br><div style="display: flex; justify-content: space-between;"> <div> <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"/> </div> <div> <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)         </div> </div> |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |              |                                                                                                                                                                                                                                   |

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

## INTERPRETATION

| Compaction                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Colour                                                                                                                                                                                                                                                                                                                                                    |                          | Composition              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input type="checkbox"/> silty <input type="checkbox"/><br>sandy <input checked="" type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.34 m                                                                                                                                                           | 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                        |                          |                          |
| 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                                                                                                                      | <div> <div> <input type="checkbox"/> construction <input type="checkbox"/> use <input type="checkbox"/> disuse </div> </div> |
| /          | /         | 1610318<br>1610319 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16261 | Date 09/02/18<br>Initials RL/FG<br>Checked by                                                                                |

# ADDITIONAL INFORMATION

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

FILL OF DITCH. UNDER THE FILL (161461) WE FOUND THE NATURAL INFILLING (161462) - THIS CALICET. THIS IS MODERATELY COMPACT, MID GREY COLOUR AND SANDY CLAY COMPOSITION. THE THICKNESS MAX OF THIS LAYER IS 0,34m. IN THIS NATURAL INFILLING WE CAN SEE OCCASIONAL INCLUSIONS OF MANGANESE IN BOTH SECTION NE (D16261 AND PHOTO 1610918 - 1610919) AND SW. WE FOUND LITHO THAT IS FLINT.

Refer to context (161460) -> FOR SECTION

## SKETCHES

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

(161461) -> MATRIX



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                          |                             |                                   |                                                                                                                        |
|--------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TEA 14</b> | Sub-area/Trench                   | Context number<br><b>(161463)</b>                                                                                      |
| ECR#                     | Subgroup                    | Parent context<br><b>[161466]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161462)</b> |  |  | Same as context |
|  |  | <b>(161463)</b> |  |  | Cuts context    |
|  |  | <b>(161464)</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"/> |  |                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                               | Interpretation list:<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>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE                                                                                                                               |  | <b>Sides</b><br>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 checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input checked="" 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 checked="" type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                          | Interpretation list:<br>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>0.36</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 checked="" type="checkbox"/> |

## CROSS REFERENCE

|            |           |                                               |                                                                                                                                                                            |
|------------|-----------|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos<br><b>1610910</b><br><b>1610919</b> | Drawing nos<br><b>(16126)</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>SHEET 2B</b> |
|------------|-----------|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>9.02.16</b>                                                                                           |
| Initials <b>FG. RG</b>                                                                                        |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

THIS LAYER, LIKE IN MOST OF THE OTHERS SWT OF THE DITCH, IS PART OF THE BANKS MATERIAL. ~~MA~~ THIS MATERIAL IN ~~AN~~ A PHASE OF THE LIFE OF THE DITCH AND THE MOUND WAS PUT BACK IN THE DITCH. PROBABLY ALSO (161462) IS PART OF THE SAME ACTION. THERE ARE TWO FLINT.

Refer to context

(161460) (161461)  
(161465)

## SKETCHES

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



|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>1EA 16</b> | Sub-area/Trench                   | Context number<br><b>(161464)</b>                                                                                      |
| ECB#                    | Subgroup                    | Parent context<br><b>[161466]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161465)</b> |  |  | Same as context |
|  |  | <b>(161464)</b> |  |  | Cuts context    |
|  |  | <b>[161466]</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<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 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 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 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 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>0.20</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*                                                                                                                                                                               | 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                                                                                                                                                                             |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |           |                                                                                                                                                                                                                                                                                                                                                                                |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

**CROSS REFERENCE**

|            |           |                                               |                                                                                                                                                                       |
|------------|-----------|-----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos<br><b>1610018</b><br><b>1610914</b> | Drawing nos <b>D6201</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>SHEET 28</b> |
|------------|-----------|-----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Basic process**

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>9-02-18</b>                                                                                           |
| Initials <b>FG/DG</b>                                                                                         |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

SANDY RED LAYER VERY HARD TO DIG, COMPACT, PROBABLY FOR  
THE PRESENCE OF IRON PAN IT IS THE RESULT OF THE  
WATER ACTION ON THE EDGE. ~~RED LAYER~~

Refer to context

161466 161462  
161466

## 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 16</b> | Sub-area/Trench<br><b>—</b>       | Context number<br><b>(161465)</b>                                                                                      |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>        | Parent context<br><b>[161466]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |          |
|--|--|-----------------|--|--|-----------------|----------|
|  |  | <b>(161467)</b> |  |  | Same as context | <b>—</b> |
|  |  | <b>(161465)</b> |  |  | Cuts context    | <b>—</b> |
|  |  | <b>(161464)</b> |  |  | Cut by context  | <b>—</b> |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |  | <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input type="checkbox"/> ditch<br><input type="checkbox"/> ring-ditch<br><input type="checkbox"/> beam slot<br><input type="checkbox"/> construction cut<br><input type="checkbox"/> robber cut<br><input type="checkbox"/> gully<br><input type="checkbox"/> palaeochannel<br><input type="checkbox"/> furrow<br><input type="checkbox"/> field boundary<br><input type="checkbox"/> burial cut<br><input type="checkbox"/> other cut (describe below) |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br>                                                                                                                                   | <b>Sides</b><br><input type="checkbox"/> vertical<br><input type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input 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"/>                                       |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|----------------|-----------|--------------|----------------|------|------------------|-------|----------------|------------------|-------|----------------|------------------|---------|--------------|------------------|---------|--------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown<br>greyish <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> yellow<br>reddish <input checked="" type="checkbox"/> red<br>blueish <input type="checkbox"/> blue | <b>Composition</b><br>clayey <input type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input checked="" 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | stones*   | chalk    | iron pan       | manganese | charcoal     | plant remains* | wood | marine shell     | bone* | pot            | fired clay / CBM | CTP   | mortar/plaster | leather/textile  | glass   | metal        | industrial waste | lithics | coarse stone |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | chalk                                                                                                                                                                                                                                                                                                                                                                                                                 | iron pan                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | manganese | charcoal | plant remains* | wood      | marine shell | bone*          | pot  | fired clay / CBM | CTP   | mortar/plaster | leather/textile  | glass | metal          | industrial waste | lithics | coarse stone |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| frequency<br>bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

## CROSS REFERENCE

|                        |                       |                                               |                                                                                                                                                                          |
|------------------------|-----------------------|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>—</b> | Finds nos<br><b>—</b> | Photo nos<br><b>1610918</b><br><b>1610918</b> | Drawing nos<br><b>S11 228</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16261</b> |
|------------------------|-----------------------|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date<br><b>03/02/18</b>                                                                                       |
| Initials<br><b>R4/FG</b>                                                                                      |
| Checked by<br><b>—</b>                                                                                        |

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

# ADDITIONAL INFORMATION

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

FILL OF DITCH. THIS IS THE NATURAL INFILLING  
~~ON~~ ON THE CUT [161466]. THE THICKNESS MAX  
 IS 0.20 m. IT IS MODERATELY COMPACT, REDDISH  
 YELLOW COLOUR (REDDISH BECAUSE OF  
 IRON PAN) AND SILTY SAND COMPOSITION.  
 WE FOUND IT ONLY IN THE NE FAC. SECTION  
~~ATTACHED~~ ATTACHED TO THE W EDGE.  
 IT WAS A BIT HARD TO UNDERSTAND THE  
 EDGE IN THIS PARTICULAR POINT CLOSE  
 THE SECTION BECAUSE THE EDGE IS  
 REDDISH YELLOW COLOUR AND SANDY COMPOSITION.

Refer to context

(161461) →

MATRIX

SKETCHES

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

(161460) → SECTION



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                             |                                  |                                                                                                                        |
|-------------------------|-----------------------------|----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site Code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>—</b>      | Context number<br><b>1614.66</b>                                                                                       |
| ECB #<br><b>—</b>       | Subgroup<br><b>—</b>        | Parent context<br><b>1614.66</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                  |  |  |                 |
|--|--|------------------|--|--|-----------------|
|  |  | <b>(1614.64)</b> |  |  | Same as context |
|  |  | <b>1614.66</b>   |  |  | Cuts context    |
|  |  | <b>(1610.03)</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>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                                     | <b>Sides</b><br>1 <input type="checkbox"/> vertical<br>1 <input type="checkbox"/> steep<br>1 <input checked="" type="checkbox"/> moderate sloping<br>1 <input type="checkbox"/> gentle<br>1 <input type="checkbox"/> stepped<br>1 <input type="checkbox"/> undercutting<br>1 <input type="checkbox"/> complex* | <b>Base</b><br>— <input type="checkbox"/> flat<br>U <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>3 m</b>                                                                                                                                                                                                                                                                                    | <b>Width</b><br><b>4.06 m</b>                                                                                                                                                                                                                            | <b>Depth</b><br><b>1.18 m</b> | <b>Diameter</b><br><b>—</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                               |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

### FILL/DEPOSIT

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

### DESCRIPTION

### INTERPRETATION

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

|                        |                       |                                               |                                                                                                                        |
|------------------------|-----------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>/</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610318</b><br><b>1610319</b> | Drawing nos<br><b>JH 28</b><br><b>D16261</b>                                                                           |
|                        |                       |                                               | 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 <b>03/02/18</b>                                                                                          |
| Initials <b>RC / FG</b>                                                                                       |
| Checked by                                                                                                    |



# ADDITIONAL INFORMATION

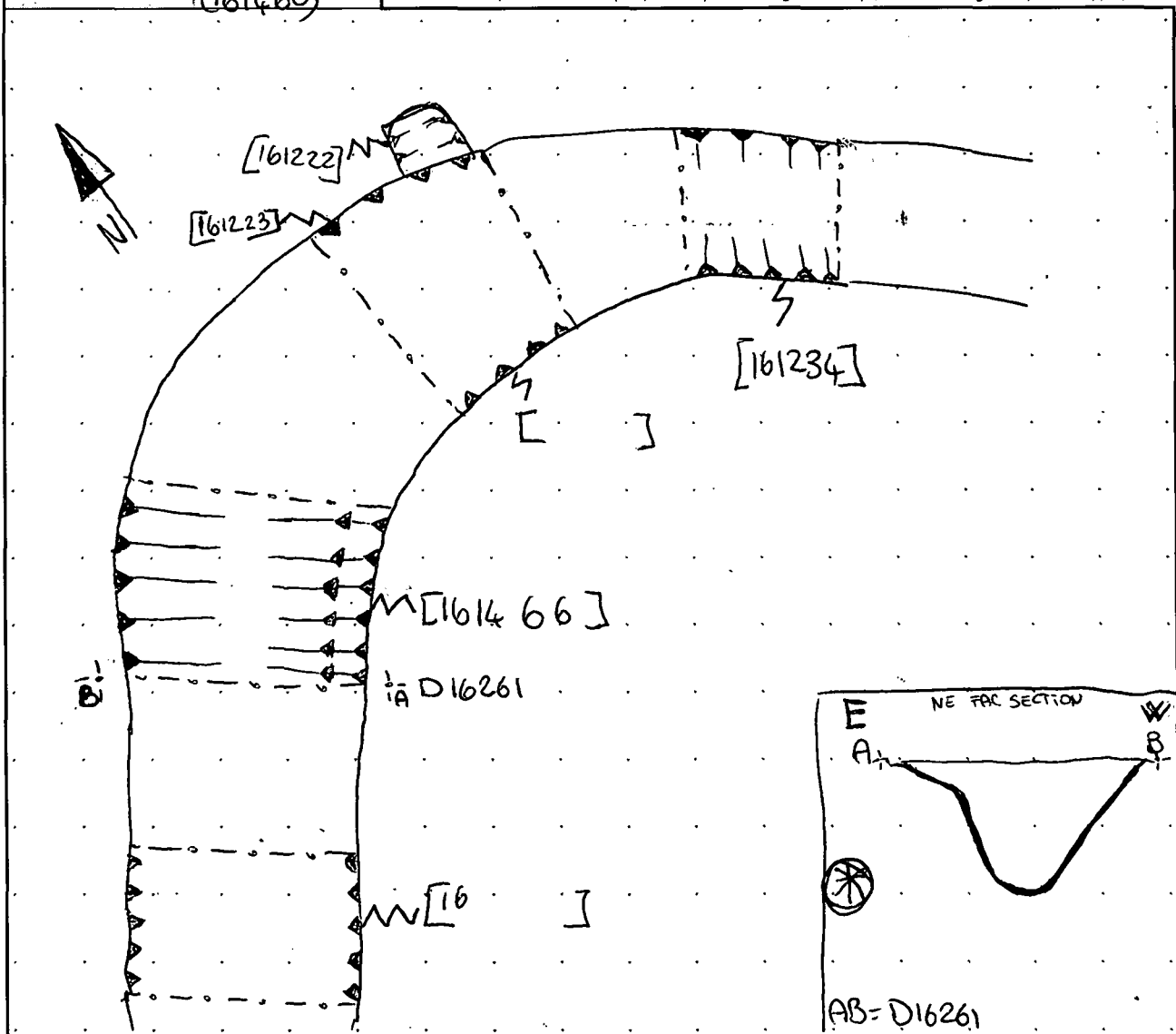
(any further details that may be important for understanding the context, including items marked \* overleaf)

CUT OF RING DITCH. ~~WEDGED~~ IN THIS SLOT (3m LENGTH) THE WIDTH OF BOTH SECTIONS (NE AND SW) IS ~~4~~ 4m AND THE DEPTH MAX IS 1.18m. THE ~~W~~ W EDGE HAS A MODERATE SLOPING SIDE WHILE THE EAST EDGE IS STEPPED, THAT IS A FIRST MODERATE SLOPING AND ~~MODERATE~~ THEN A STEEP SLOPING SIDE. IT HAS A CONCAVE BASE. THIS CUT CUTS THE NATURAL (161003). IN THIS SLOT THIS CUT HAS 8 FILLS → REFER TO CONTEXT (161461) FOR MATRIX AND (161460) FOR THE SECTION SKETCH.

Refer to context (161461)  
(161460)

## SKETCHES

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





|                         |                             |                                   |                                                                                                                        |
|-------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>ALC</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>—</b>       | Context number<br><b>(161467)</b>                                                                                      |
| ECB-#<br><b>—</b>       | Subgroup<br><b>—</b>        | Parent context<br><b>[161466]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |                 |  |  |                 |          |
|--|--|-----------------|--|--|-----------------|----------|
|  |  | <b>(161463)</b> |  |  | Same as context | <b>—</b> |
|  |  | <b>(161467)</b> |  |  | Cuts context    | <b>—</b> |
|  |  | <b>(161465)</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>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

**FILL/DEPOSIT**

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

**DESCRIPTION**

**INTERPRETATION**

| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input 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"/> <input checked="" type="checkbox"/> clay<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 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>0.14m</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></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | stones*   | chalk    | iron pan       | manganese | charcoal     | plant remains* | wood | marine shell     | bone* | pot            | fired clay / CBM | CTP   | mortar/plaster | leather/textile  | glass   | metal        | industrial waste | lithics | coarse stone |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | iron pan                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | manganese | charcoal | plant remains* | wood      | marine shell | bone*          | pot  | fired clay / CBM | CTP   | mortar/plaster | leather/textile  | glass | metal          | industrial waste | lithics | coarse stone |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>frequency</b> <b>O</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>bulk find</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**CROSS REFERENCE**

|                        |                       |                                               |                                                                                                                                                                  |
|------------------------|-----------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>✓</b> | Finds nos<br><b>✓</b> | Photo nos<br><b>1610318</b><br><b>1610318</b> | Drawing nos <b>28</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16261</b> |
|------------------------|-----------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Basic process**

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>03/02/18</b>                                                                                          |
| Initials <b>RG/FG</b>                                                                                         |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

TILL OF DITCH. THIS IS A NATURAL INFILLING OF A  
ROUND DITCH. WE FOUND IT UNDER THE FILL (161463).  
IT IS MODERATELY COMPACT, GREY COLOUR  
AND GRAVELLY CLAY COMPOSITION. IN THIS  
FILL THERE ARE STONES (SMALL SIZE).  
THE THICKNESS MAX IS 0.14 m.

Refer to context (161461) → MATRIX

## SKETCHES

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

(161460) → SECTION.

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                  |                      |                          |                                                                                                                        |
|------------------|----------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A16 | Area/Field<br>TCA 16 | Sub-area/Trench          | Context number<br>161468                                                                                               |
| ECB#             | Subgroup             | Parent context<br>161469 | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 161002 |  |  | Same as context |
|  |  | 161468 |  |  | Cuts context    |
|  |  | 161469 |  |  | 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"/> 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>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown<br>greyish <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> red<br>blueish <input type="checkbox"/> blue | <b>Composition</b><br>clayey <input type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat | <input type="checkbox"/> topsoil<br><input type="checkbox"/> subsoil<br><input type="checkbox"/> geological subsoil<br><input type="checkbox"/> remnant topsoil<br><input type="checkbox"/> surface<br><input type="checkbox"/> occupation layer<br><input type="checkbox"/> dumped layer<br><input type="checkbox"/> deliberate backfill<br><input type="checkbox"/> destruction debris<br><input type="checkbox"/> bedding layer<br><input type="checkbox"/> natural infilling<br><input type="checkbox"/> colluvial layer<br><input type="checkbox"/> in situ burning<br><input type="checkbox"/> post-pipe<br><input type="checkbox"/> packing<br><input checked="" type="checkbox"/> cremation<br><input type="checkbox"/> other fill/deposit (describe below) |
| <b>Thickness</b><br>0.11m                                                                                                                                                             | black <input checked="" type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                         | other* <input type="checkbox"/>                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency<br>bulk find                                                                                                                                                                | stones*<br>chalk<br>iron pan<br>manganese<br>charcoal<br>plant remains*<br>wood<br>marine shell<br>bone*<br>pot<br>fired clay / CBM<br>CTP<br>mortar/plaster<br>leather/textile<br>glass<br>metal<br>industrial waste<br>lithics<br>coarse stone                                                                                                                                                                                 |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|                     |                |                                 |                                                                                                                                                         |
|---------------------|----------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br>16228 | Finds nos<br>/ | Photo nos<br>1610920<br>1610921 | Drawing nos<br>16263<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>JH 24 |
|---------------------|----------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☐ use ☐ disuse ☒

Date: 9/2/18

Initials: GL

Checked by:

# ADDITIONAL INFORMATION

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

FILL OF POSSIBLE CREMATION WITH MODERATE PRESENCE OF ANGULAR  
SMALL STONES AND SMALL BITS OF BONES (TOO TINY TO BE KEPT,  
CERTAINLY HAS BEEN SAMPLED IN A SAMPLE BUCKET)

Refer to context

## SKETCHES

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

SEE CONTEXT SHEET [161169]

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                  |                      |                          |                                                                                                                        |
|------------------|----------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>A16 | Area/Field<br>TCA 16 | Sub-area/Trench          | Context number<br>161469                                                                                               |
| ECB#             | Subgroup             | Parent context<br>161469 | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |         |
|--|--|----------|--|--|-----------------|---------|
|  |  | 161468   |  |  | Same as context |         |
|  |  | 161469   |  |  | Cuts context    |         |
|  |  | 161003?? |  |  | Cut by context  | 161003? |

## 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: 0.11 / diameter: 0.30

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) ☒ CREMATION CUT

## 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 ☐  
black ☐ white ☐ other\* ☐

Composition

clayey ☐ clay ☐  
silty ☐ silt ☐  
sandy ☐ sand ☐  
gravelly ☐ gravel ☐  
peaty ☐ peat ☐  
other\* ☐

Thickness

Inclusions

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

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

frequency

bulk find

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

## CROSS REFERENCE

|            |           |                    |                                                                                                                                         |
|------------|-----------|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos          | Drawing nos                                                                                                                             |
|            |           | 1610420<br>1610421 | 16263<br>Surveyed<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>SH 24 |

Basic process

construction ☐ use ☒ disuse ☐

Date 9/2/18

Initials GL

Checked by

# ADDITIONAL INFORMATION

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

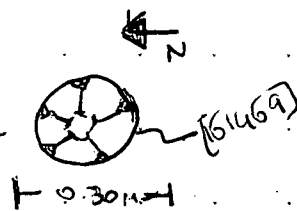
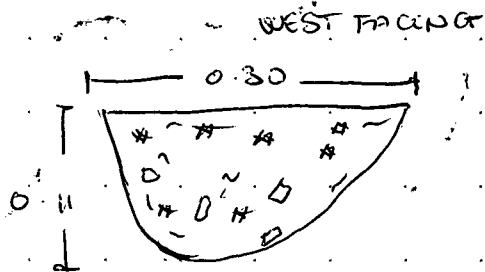
SMALL CIRCULAR CUT OF POTENTIAL CREMATIONS

THE CUT IS VERY SHALLOW - THE NORTH SIDE IS STEEPER THAN THE SOUTH SIDE

## SKETCHES

Refer to context

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



(GRAVE)

RING OF TON



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                                 |                            |                 |                                                                                                                        |
|---------------------------------|----------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>TEA16 - A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench | Context number<br><b>161470</b>                                                                                        |
| ECB #                           | Subgroup                   | Parent context  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  |               |  |  | Same as context |
|  |  | <b>161470</b> |  |  | Cuts context    |
|  |  |               |  |  | Cut by context  |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          | <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 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"/><br><b>Pot</b> | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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"/> GTP <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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | frequency<br>bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|            |           |                        |                                                                                                                                  |
|------------|-----------|------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos              | Drawing nos                                                                                                                      |
|            |           | 100-0841 -<br>100-0845 | Surveyed:<br>plan <input checked="" type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/><br>D16267 |

## Basic process

construction ☐ use ☐ disuse ☐

Date **12/2/18**

Initials **SR/SR**

Checked by

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

# ADDITIONAL INFORMATION

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

Line of brown pottery, situated at bottom of  
cut for re-cut.

Quite possibly cremation vessels due to others in near  
vicinity. But, no burnt material recovered.

At least four pits poss Bronze Age. Some  
with cording pattern.

Chase whether or not the line is deliberate.

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>TERR 16. Box 5</b> | Sub-area/trench                 | Context number<br><b>161473</b>                                                                                        |
| ECB #                   | Subgroup                            | Parent context<br><b>161475</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161002</b> |  |  | Same as context |
|  |  | <b>161473</b> |  |  | Cuts context    |
|  |  | <b>161474</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>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          | <b>Sides</b><br>] <input type="checkbox"/> vertical<br>] <input type="checkbox"/> steep<br>] <input type="checkbox"/> moderate<br>] <input type="checkbox"/> gentle<br>] <input type="checkbox"/> stepped<br>] <input type="checkbox"/> undercutting<br>] <input type="checkbox"/> complex*<br>sloping | <b>Base</b><br>— <input type="checkbox"/> flat<br>U <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>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 type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input checked="" type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input 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"/> | <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><b>0.35</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<br><b>1611065-7</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16295, sheet 21</b> |
|------------|-----------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>22.2.18</b>                                                                                           |
| Initials <b>W</b>                                                                                             |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

Natural infilling of a small (?) Ring ditch. No pottery recovered -  
but one poss. ? Neo-Early Bronze Age piece of worked stone.

Refer to context 161475

## SKETCHES

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



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

|           |             |                 |                                                                                                        |
|-----------|-------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field  | Sub-area/Trench | Context number                                                                                         |
| A14       | TBA 16 RnGS |                 | 161474                                                                                                 |
| ECB #     | Subgroup    | Parent context  | Context type                                                                                           |
|           |             | L16475          | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 161473 |  |  | Same as context |
|  |  | 161474 |  |  | Cuts context    |
|  |  | 161475 |  |  | Cut by context  |

# INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              |                                                                                                                                                                                                                                   |                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              |                                                                                                                                                                                                                                   |                 |
| <b>Orientation</b><br><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                 | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="font-size: 4em; margin: 0 10px;">}</div> <div> <input type="checkbox"/> sloping         </div> </div> |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape: result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              |                                                                                                                                                                                                                                   |                 |

pit ☐

post-hole ☐

stake-hole ☐

ditch ☐

ring-ditch ☐

beam slot ☐

construction cut ☐

robber cut ☐

gully ☐

palaeochannel ☐

furrow ☐

field boundary ☐

burial cut ☐

other cut (describe below) ☐

## 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 | <input type="checkbox"/> light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/> | <input type="checkbox"/> brownish <input type="checkbox"/> brown<br><input type="checkbox"/> greyish <input type="checkbox"/> grey<br><input type="checkbox"/> orangeish <input type="checkbox"/> orange<br><input type="checkbox"/> yellowish <input checked="" type="checkbox"/> yellow<br><input type="checkbox"/> reddish <input type="checkbox"/> red<br><input type="checkbox"/> blueish <input type="checkbox"/> blue | <input type="checkbox"/> clayey <input type="checkbox"/> clay<br><input checked="" type="checkbox"/> silty <input type="checkbox"/> silt<br><input type="checkbox"/> sandy <input type="checkbox"/> sand<br><input type="checkbox"/> gravelly <input checked="" type="checkbox"/> gravel<br><input type="checkbox"/> peaty <input type="checkbox"/> peat |             |          |                |      |              |       |     |                  |     |                |                 |       |       |                  |         |              |  |
| <b>Thickness</b><br>0.11                                                                                                                                         | <input type="checkbox"/> black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                    | <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   |                  |     |                |                 |       |       |                  |         |              |  |
| 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)

### Basic process

|             |            |            |                                                                                                                                           |                                                                                                               |
|-------------|------------|------------|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos. | Finds nos. | Photo nos. | Drawing nos.                                                                                                                              | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|             |            | 1611065-7  | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16295 sheet 21 | Date 16/12/21<br>Initials KR<br>Checked by                                                                    |

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

# ADDITIONAL INFORMATION

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

natural infilling of a small ring ditch, which includes eroded "natural" - ie, gravel from the side. Indicate ditch was banked on the outside. One ~~small~~ v. small frag of pottery identified but too small to recover for identification.

Refer to context 161475

## SKETCHES

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





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

|           |             |                 |                                                                                                        |
|-----------|-------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field  | Sub-area/Trench | Context number                                                                                         |
| A14       | TBA 16 Bnds |                 | 161475                                                                                                 |
| ECB #     | Subgroup    | Parent context  | Context type                                                                                           |
|           |             | 161475          | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |        |  |  |                     |
|--|--|--------|--|--|---------------------|
|  |  | 161474 |  |  | Same as context     |
|  |  | 161475 |  |  | Cuts context 161003 |
|  |  | 161003 |  |  | 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 checked="" type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                     |
| <b>Orientation</b><br> N/A<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 checked="" 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 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* | 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>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br>21.68m                                                                                                                                                                                                                                                                  | <b>Width</b><br>1.01m                                                                                                                                                                                                                        | <b>Depth</b><br>0.34m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>Diameter</b><br> |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input checked="" 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"/> moderately compact | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/>                                                                                 |                                                                                                                                                                                         | clayey <input type="checkbox"/> silty <input type="checkbox"/> sandy <input type="checkbox"/> gravelly <input type="checkbox"/> peaty <input type="checkbox"/> | <input type="checkbox"/> clay <input type="checkbox"/> silt <input type="checkbox"/> sand <input type="checkbox"/> gravel <input type="checkbox"/> peat |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> friable            | brownish <input type="checkbox"/> greyish <input type="checkbox"/> orangeish <input type="checkbox"/> yellowish <input type="checkbox"/> reddish <input type="checkbox"/> blueish <input type="checkbox"/> | brown <input type="checkbox"/> grey <input type="checkbox"/> orange <input type="checkbox"/> yellow <input type="checkbox"/> red <input type="checkbox"/> blue <input type="checkbox"/> |                                                                                                                                                                |                                                                                                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                             | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                              |                                                                                                                                                                                         | other* <input type="checkbox"/>                                                                                                                                |                                                                                                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Inclusions                                                        |                                             |                                                                                                                                                                                                            |                                                                                                                                                                                         |                                                                                                                                                                |                                                                                                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                     | chalk                                                                                                                                                                                                      | iron pan                                                                                                                                                                                | manganese                                                                                                                                                      | charcoal                                                                                                                                                | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| frequency                                                         |                                             |                                                                                                                                                                                                            |                                                                                                                                                                                         |                                                                                                                                                                |                                                                                                                                                         |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 'bulk find                                                        | <input type="checkbox"/>                    | <input type="checkbox"/>                                                                                                                                                                                   | <input type="checkbox"/>                                                                                                                                                                | <input type="checkbox"/>                                                                                                                                       | <input type="checkbox"/>                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <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 checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/><br>Date <u>22.2</u><br>Initials <u>LF</u><br>Checked by |
|            |           | 1611065-7 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16295 sheet 21 |                                                                                                                                                                       |

*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)

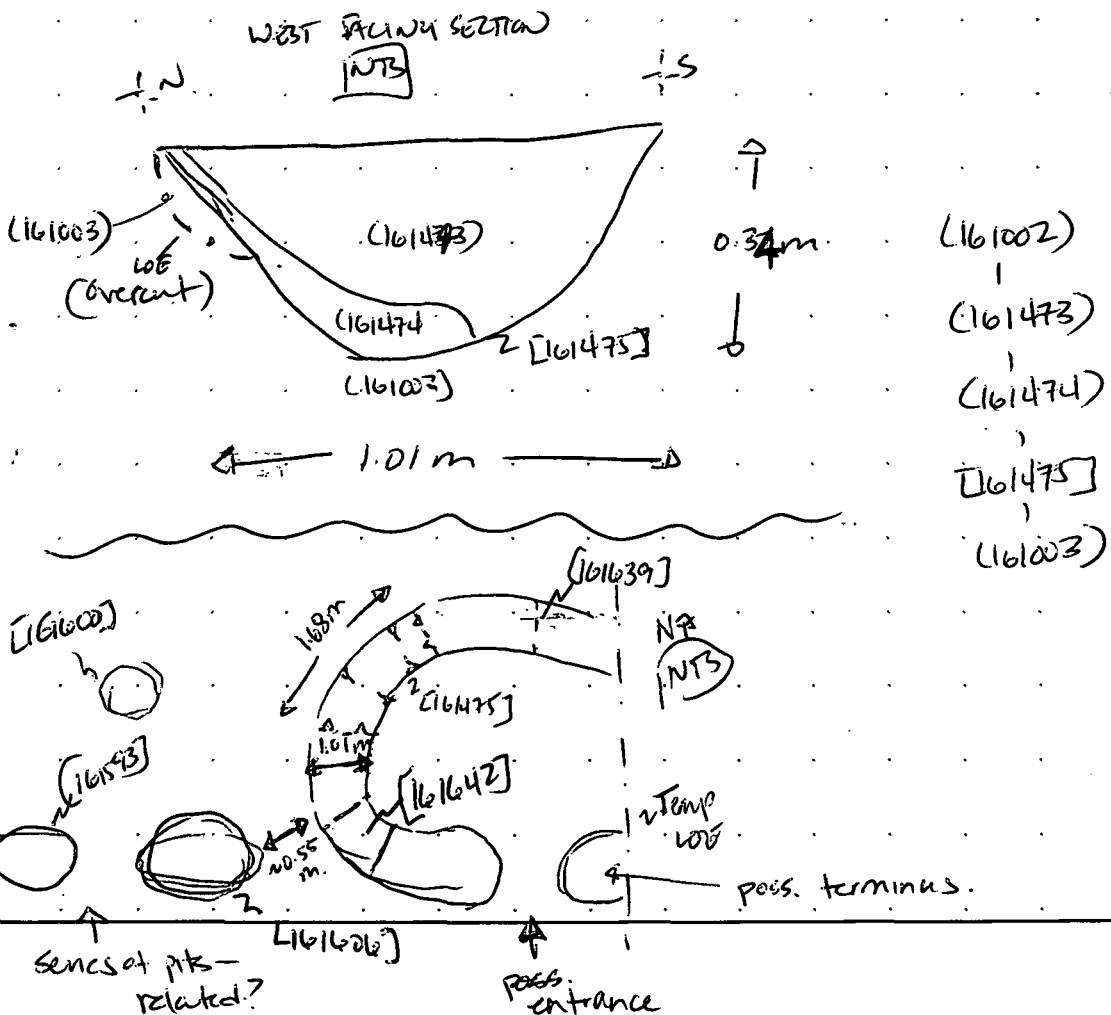
This is the cut of a small (?) ring & relatively shallow(?) ring ditch. to the south there are a series of pits, & its currently unknown if these are associated. Fill (161474) indicates ditch possibly banked to the outside, although a similar granular fill isn't seen in [161639] or [161642].

Pass Entrance to possible? Ring ditch is to the south. However, ditch extends beyond E L.O.E so remainder of ditch still needs to be exposed to confirm.

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>A 14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/trench<br><b>2</b>       | Context number<br><b>(161476)</b>                                                                                      |
| ECB#                     | Subgroup                    | Parent context<br><b>[161478]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |                                     |
|--|--|-----------------|--|--|-----------------|-------------------------------------|
|  |  |                 |  |  | Same as context | <input checked="" type="checkbox"/> |
|  |  | <b>(161476)</b> |  |  | Cuts context    | <input checked="" type="checkbox"/> |
|  |  | <b>(161477)</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"/> |  |                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                                   | <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<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><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 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 |                          | <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 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>0.15</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |         |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |         |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <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"/> |         |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Possible creation</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |         |                |                 |       |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |

### CROSS REFERENCE

|                            |               |                              |                                                                                                                                                                     |
|----------------------------|---------------|------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>16214</b> | Finds nos<br> | Photo nos<br><b>1610.080</b> | Drawing nos <b>16.223</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>8# 22</b> |
|----------------------------|---------------|------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>31.1.18</b>                                                                                           |
| Initials <b>CV</b>                                                                                            |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

FILL OF POSSIBLE CREMATION

IT WAS ON TOP OF THE CUT

IT WAS MODERATELY COMPACT WITH BROWN GREYISH COLOR AND CLAY SILTY TEXTURE.

THERE WAS A MODERATE PRESENCE OF CHARCOAL AND OCCASIONAL TRACES OF ROOTS.

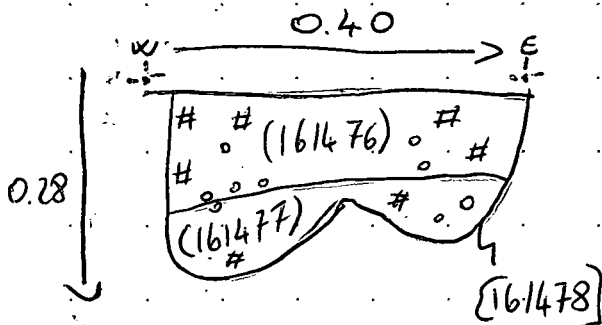
NO FINDS.

Refer to context

161450

## SKETCHES

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

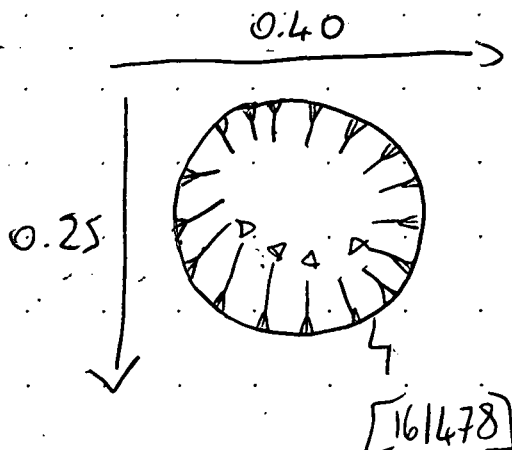


KEY  
# = CHARCOAL  
o = STONE

(161476)

(161477)

[161478]



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                          |                             |                                   |                                                                                                                        |
|--------------------------|-----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench                   | Context number<br><b>(161477)</b>                                                                                      |
| ECB #                    | Subgroup                    | Parent context<br><b>[161478]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |  |
|--|--|-----------------|--|--|-----------------|--|
|  |  | <b>(161476)</b> |  |  | Same as context |  |
|  |  | <b>(161477)</b> |  |  | Cuts context    |  |
|  |  | <b>[161478]</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>H <input type="checkbox"/> E-W<br>↗ <input type="checkbox"/> NE-SW<br>↘ <input type="checkbox"/> NW-SE<br>N                                                                                                                          | <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>Z <input type="checkbox"/> stepped<br>U <input type="checkbox"/> undercutting<br>C <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>C <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of:</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                      |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input 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 | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><b>0.10</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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<br><b>16215</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610880</b> | Drawing nos<br><b>D16223</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>3A22</b> |
|----------------------------|-----------------------|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>31.1.18</b>                                                                                           |
| Initials <b>CV</b>                                                                                            |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

## FILL OF POSSIBLE CREMATION

IT WAS MODERATELY COMPACT, BROWN-ORANGEISH  
COLOR AND CLAY SILTY TEXTURE.

THERE WAS OCCASIONAL CHARCOAL ESPECIALLY ON THE  
TOP, MAYBE FROM (161476) AND TRACES OF ROOTS.

NO FINDS

Refer to context

161476  
161450

## 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 16</b> | Sub-area/Trench                   | Context number<br><b>[161478]</b>                                                                                      |
| ECB#                     | Subgroup                    | Parent context<br><b>[161478]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161477)</b> |  |  | Same as context |
|  |  | <b>[161478]</b> |  |  | Cuts context    |
|  |  |                 |  |  | 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 checked="" 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<br><input type="checkbox"/> S                                                                             | <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><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 checked="" type="checkbox"/> uneven<br><input type="checkbox"/> complex* |             |             |
| Dimensions                                                                                                                                                                                                                                                                              | Length                                                                                                                                                                                                                                                                   | Width                                                                                                                                                                                                                         | Depth       | Diameter    |
| in metres                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               | <b>0.28</b> | <b>0.40</b> |
| Shape result of (tick all that apply)                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |             |             |
| design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                       |                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                               |             |             |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> pit<br><input type="checkbox"/> post-hole<br><input type="checkbox"/> stake-hole<br><input 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) |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## POSSIBLE EXPLANATION

## 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*<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 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  |
|                                                                                                                        |           | <b>1610880</b> | <b>16223</b> |
| 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                                             | <b>31.1.18</b>                                               |
| Initials                                         | <b>CV</b>                                                    |
| Checked by                                       |                                                              |

# ADDITIONAL INFORMATION

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

CUT OF POSSIBLE CREMATION

IT ~~WAS~~ HAD A CIRCULAR SHAPE, VERTICAL SIDE AND UNEVEN BASE

IT WAS CLOSE TO ANOTHER POSSIBLE CREMATION [161450] AND TO SUD AND WEST THERE WAS OTHER CREMATION OF WHICH SOME WITH VESSEL

Refer to context

161450  
161476

## SKETCHES

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



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                               |                             |                                 |                                                                                                                        |
|-------------------------------|-----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 16147</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>/</b>     | Context number<br><b>161479</b>                                                                                        |
| ECB #<br><b>/</b>             | Subgroup<br><b>/</b>        | Parent context<br><b>161480</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161447</b> |  |  | Same as context |
|  |  | <b>161479</b> |  |  | Cuts context    |
|  |  | <b>161480</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><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 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 type="checkbox"/> <input checked="" type="checkbox"/> brown<br>greyish <input type="checkbox"/> <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> <input type="checkbox"/> red<br>blueish <input type="checkbox"/> <input type="checkbox"/> blue | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> <input type="checkbox"/> clay<br>silty <input type="checkbox"/> <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat | <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 checked="" type="checkbox"/></p> <p>other fill/deposit (describe below) <input type="checkbox"/></p> |
| <b>Thickness</b><br>0.10 m Max                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | other* <input checked="" type="checkbox"/> Run in context                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <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<br><b>S 16217</b><br>(100%) | Finds nos<br><b>F 16311</b><br>(Pot) | Photo nos<br><b>1610888</b><br><b>1610889</b><br><b>1610890</b><br><b>1610891</b><br><b>1610892</b> | Drawing nos<br><b>S 16225</b><br><b>S 16226</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D: 16276</b> |
|----------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date: <b>02/02/18</b>                                                                                         |
| Initials: <b>S. L. C.</b>                                                                                     |
| Checked by:                                                                                                   |

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

# ADDITIONAL INFORMATION

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

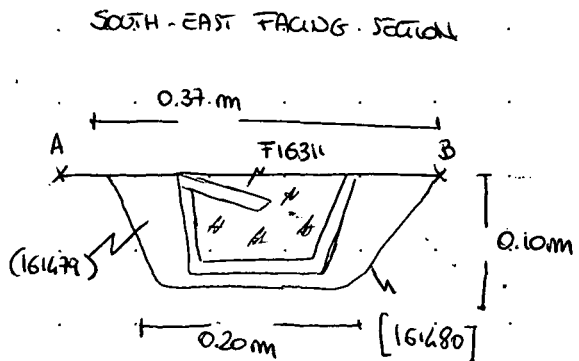
DARK BROWNISH FILL OF A CREMATION PIT, SIMILAR TO THE OTHER CREMATIONS DETECTED IN CLOSE PROXIMITY.  
CHARCOALY BURNED MATERIAL WITH OCCASIONAL SMALL PEBBLES AND VERY FRAGMENTED BONES.  
VEIER (F16311) FOUND WHOLE, LIFTED AND WRAPPED.

THEORY THAT CREMATION FILLS/POTS HAVE BEEN TRUNCATED  
B'S LATER RECUIT [161447]

Refer to context | 161480

## 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 16</b> | Sub-area/Trench                 | Context number<br><b>161480</b>                                                                                        |
| ECB #                    | Subgroup                    | Parent context<br><b>161480</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |                   |  |                 |
|--|--|---------------|-------------------|--|-----------------|
|  |  | <b>161479</b> |                   |  | Same as context |
|  |  | <b>161480</b> |                   |  | Cuts context    |
|  |  | <b>161448</b> | <del>161449</del> |  | Cut by context  |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                                 |  | pit <input 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 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 type="checkbox"/> NW-SE<br>Not applicable <input checked="" type="checkbox"/>                                                                                                       | <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><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><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* |                                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                                     | <b>Length</b><br><b>0.36</b>                                                                                                                                                                                                                                                             | <b>Width</b><br><b>0.37</b>                                                                                                                                                                                                                  | <b>Depth</b><br><b>0.10 max</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"/>                                                 |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>design</b> <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                           |                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                              |                                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

### FILL/DEPOSIT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| stones* <input type="checkbox"/> 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                                                                                                                                        |
|            |           | 100-0810<br>100-0811<br>100-0812<br>100-0813 | <del>100-0816</del><br>S#26<br>plan <input checked="" type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/><br>D16276 |

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>02/02/18</b>                                                                                          |
| Initials <b>SK</b>                                                                                            |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

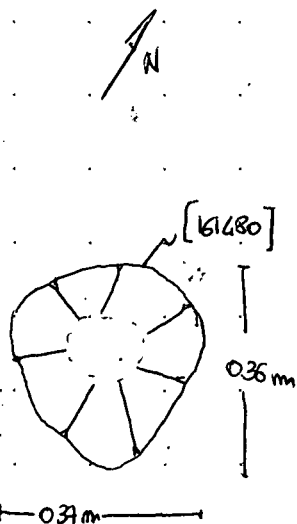
(any further details that may be important for understanding the context, including items marked \* overleaf)

SUB-CIRCULAR CUT OF CEMENTATION PIT, LIKELY CUT INTO THE AUG. BARROW EXPOSURE.  
VESSEL FIG311 WRAPPED AND LIFTED, IRE BRONZE AGE?  
ASSOCIATED WITH [161484]

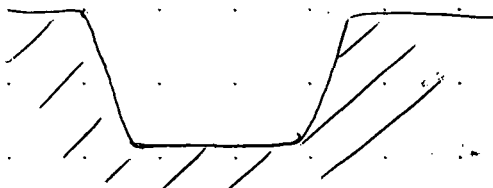
Refer to context | 161480

## SKETCHES

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



PROFILE  
~~SECTION~~



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                             |                 |                                                                                                                        |
|-------------------------|-----------------------------|-----------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench | Context number<br><b>(161481)</b>                                                                                      |
| ECB#                    | Subgroup                    | Parent context  | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | [161447] |  |  | Same as context |
|  |  | 161481   |  |  | Cuts context    |
|  |  | [161482] |  |  | 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>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>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                  |                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                             |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input checked="" type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                              | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> 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 checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input checked="" type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><b>0-20 MAX</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                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| stones*<br>chalk<br>iron pan<br>manganese<br>charcoal<br>plant remains*<br>wood<br>marine shell<br>bone* <b>FRAGMENTED</b><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                                                                                                                                                                                                                                             | frequency<br>bulk find                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

|                            |           |                                               |                                                                                                                                                                        |
|----------------------------|-----------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>16216</b> | Finds nos | Photo nos<br><b>1610885</b><br><b>1610896</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>5# 22</b><br><b>162280</b> |
|----------------------------|-----------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>01/02/18</b>                                                                                          |
| Initials <b>8MEL</b>                                                                                          |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

FILL OF POSSIBLE CREMATION -- BURNT BLACK MATERIAL WITH  
FRAGMENTED BURNT BONE REMNANTS. NO POT INCLUSIONS  
PRESENT

LIKELY DISTURBED AS WAS SITUATED UNDER A TEMPORARY  
L.O.E, WHICH WAS LATER TAKEN DOWN

SIMILAR FILL TO CREMATIONS IN CLOSE PROXIMITY

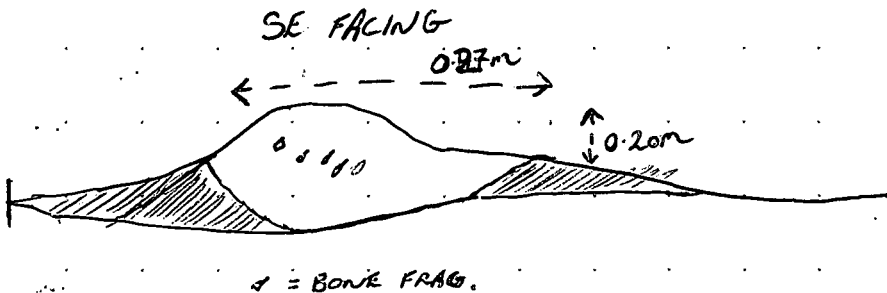
SAMPLED 100%

THEORY THAT CREMATION FILLS HAVE BEEN TRUNCATED  
BY LATER RE CUT

Refer to context (161481)

## 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 16</b> | Sub-area/Trench | Context number<br><b>[161482]</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>(161481)</b> |  |  | Same as context |
|  |  | <b>[161482]</b> |  |  | Cuts context    |
|  |  | <b>(161448)</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 checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                              |                              |  | pit <input 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 checked="" type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input checked="" type="checkbox"/> NE-SW<br>I <input checked="" type="checkbox"/> NW-SE<br>N<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 checked="" 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 checked="" type="checkbox"/> concave ( <b>SLIGHTLY</b> )<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><br><b>0.45m</b>                                                                                                                                                                                                                                                                          | <b>Width</b><br><b>0.22m</b>                                                                                                                                                                                                                                                 | <b>Depth</b><br><b>0.10m</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"/>                                                 |                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                              |                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>CREMATION</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 type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><input type="checkbox"/> black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| stones* <input type="checkbox"/><br>chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/><br>manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/><br>plant remains* <input type="checkbox"/><br>wood <input type="checkbox"/><br>marine shell <input type="checkbox"/><br>bone* <input type="checkbox"/><br>pot <input type="checkbox"/><br>fired clay / CBM <input type="checkbox"/><br>CTP <input type="checkbox"/><br>mortar/plaster <input type="checkbox"/><br>leather/textile <input type="checkbox"/><br>glass <input type="checkbox"/><br>metal <input type="checkbox"/><br>industrial waste <input type="checkbox"/><br>lithics <input type="checkbox"/><br>coarse stone <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>frequency</b><br>bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|            |           |                                             |                                                                                                                                                                |
|------------|-----------|---------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                   | Drawing nos                                                                                                                                                    |
|            |           | 1610881<br>1610883<br>1610884<br>1610893-95 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D <del>1610883</del> S# 22<br>162280 |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>01/02/18</b>                                                                                          |
| Initials <b>SMK</b>                                                                                           |
| Checked by                                                                                                    |

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



## ADDITIONAL INFORMATION

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

CUT OF SUB-ROUNDED CREMATION PIT. ON EXCAVATION, CUT APPEARS QUITE SHALLOW, ALTHOUGH THIS MAY BE THE RESULT OF DISTURBANCE WHEN REMOVING SEALANT MATERIAL.

SLIGHTLY ROUNDED BASE, BUT NOT VERY VISIBLE IN PLAN.

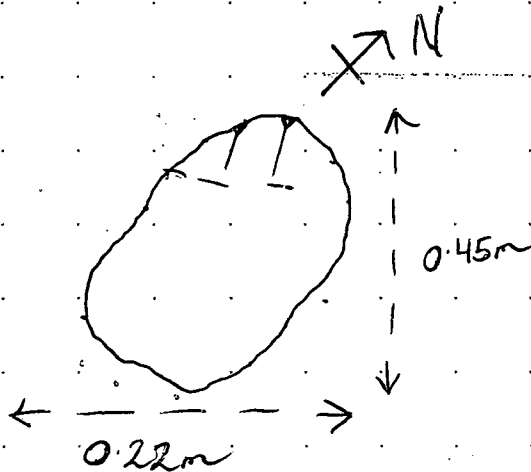
ONE OF OVER A DOZEN SIMILAR CREMATIONS RECOVERED FROM SLOT RELATING TO OUTER ENCLOSURE OF RING BARROW

Refer to context

[161482]

## SKETCHES

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



## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 161447 |  |  | Same as context |
|  |  | 161483 |  |  | Cuts context    |
|  |  | 161484 |  |  | 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 checked="" type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                                              |                 |
| <b>Orientation</b><br><input checked="" 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>                                      | <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 checked="" 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. D16 22 7                                                                                             | construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| S16218     | F16312    | 1610887   | Surveyed: SA 26<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/> | Date: 1/2/18                                                                                                  |
|            |           |           |                                                                                                                   | Initials: SR                                                                                                  |
|            |           |           |                                                                                                                   | Checked by:                                                                                                   |

# ADDITIONAL INFORMATION

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

Fill of small cremation pit.

Pot found, possibly late bronze age. F16312

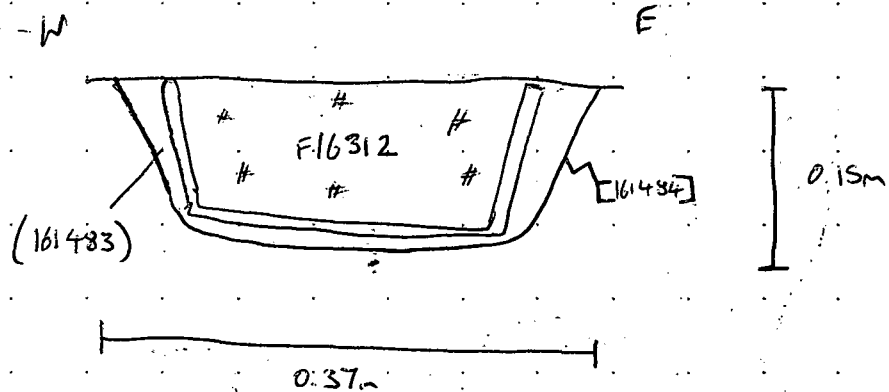
Some of the fill was excavated from the pit  
before the pit was refilled, this will be in Sample 16218

Refer to context

## SKETCHES

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

### SKETCH SECTION



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                               |            |                                 |                                                                                                                        |
|-------------------------------|------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>TEA16 A14</b> | Area/Field | Sub-area/Trench                 | Context number<br><b>161484</b>                                                                                        |
| ECB #                         | Subgroup   | Parent context<br><b>161484</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |               |  |                 |
|--|--|---------------|---------------|--|-----------------|
|  |  | <b>161483</b> |               |  | Same as context |
|  |  | <b>161484</b> | <b>F163i2</b> |  | Cuts context    |
|  |  |               |               |  | Cut by context  |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |                                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input 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"/> |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |                                 |  | <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 checked="" 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><br><b>0.10m</b>    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   | <b>Diameter</b><br><b>0.37m</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"/> | <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 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                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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 <b>016228/79</b>                                                                                                       |
|            |           | <b>1610887</b> | Surveyed: <b>5/26</b><br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |

### Basic process

|                                                                                                    |
|----------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>1/2/18</b>                                                                                 |
| Initials <b>SR</b>                                                                                 |
| Checked by                                                                                         |

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

# ADDITIONAL INFORMATION

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

Cut in Generation pit with Jirly Whole  
pit F16312

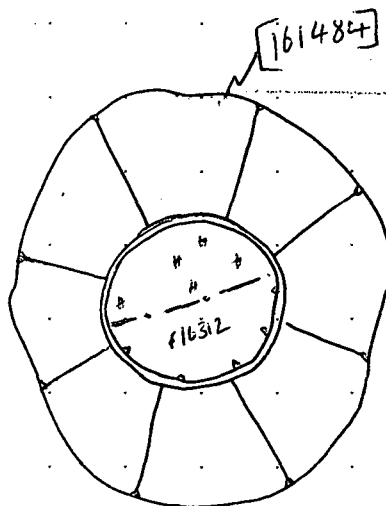
Possibly associated with nearby similar Generation  
[161480]

late Bronze Age?

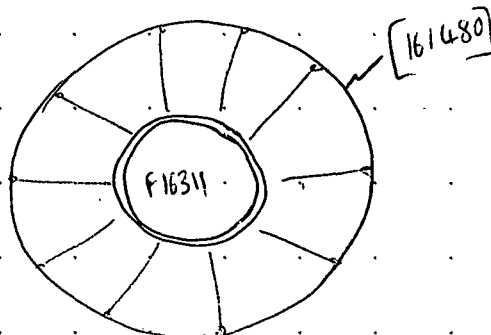
Refer to context

## SKETCHES

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



0.37m



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEAK       |                 | (161485)                                                                                               |
| EGB#      | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | (161490)        | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161056) |  |  | Same as context |
|  |  | (161485) |  |  | Cuts context    |
|  |  | (161486) |  |  | 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>                                                                                                                                         | <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* |              |                 |
| <b>Dimensions</b>                                                                                                                                                                                                                                                            | <b>Length</b>                                                                                                                                                                                                                                                 | <b>Width</b>                                                                                                                                                                                                       | <b>Depth</b> | <b>Diameter</b> |
| in metres                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                    |              |                 |
| <b>Shape result of (tick all that apply)</b>                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                    |              |                 |
| 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

|                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b>                                                                                                                                                | <b>Colour</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Composition</b>                                                                                                                                                                                                                                                                                                                                       |
| <input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> 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"/> |
| <b>Thickness</b>                                                                                                                                                 | <b>other*</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                          |
| 0.34m                                                                                                                                                            | 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 checked="" 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                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |
| 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                                                                                               |
|            |           | 1610874-9   | Surveyed:                                                                                                 |
|            |           | 1610896-900 | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|            |           |             | D: 162841                                                                                                 |

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date: 2/2/18                                                                                                  |
| Initials: WE                                                                                                  |
| Checked by:                                                                                                   |

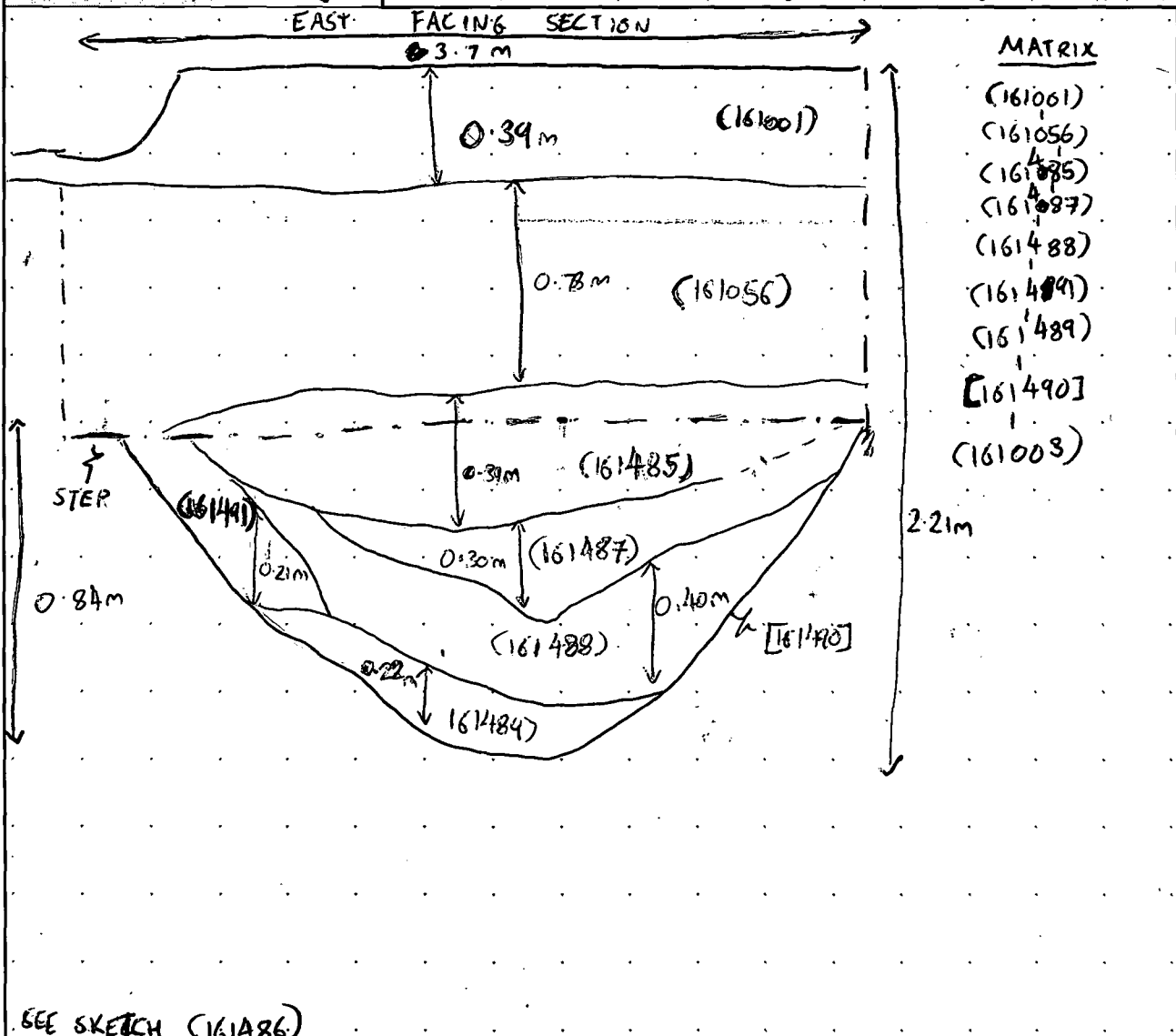
# ADDITIONAL INFORMATION

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

TOP FILL OF BARROW DITCH SLOT [161490], ~~PROBABLY~~ ~~PROBABLY~~ OF PROBABLY  
THE RESULT OF RAIN WASH INTO THE LOW LYING DITCH. CONTAINS  
SOME POT, FLINTS AND CHARCOAL INDICATING LOCAL ACTIVITY WHILE  
CONTEXT WAS FORMING

Refer to context [161490]

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





## STRATIGRAPHY

|  |  |                     |          |  |                 |
|--|--|---------------------|----------|--|-----------------|
|  |  | (161485)            |          |  | Same as context |
|  |  | (161486)            |          |  | Cuts context    |
|  |  | <del>(161487)</del> | (161303) |  | Cut by context  |

(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> 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"/>                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

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

### DESCRIPTION

## INTERPRETATION

| Compaction                                                        |                                                        | Colour                                                                                                                                |                                 | Composition                                  |                                            |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
|-------------------------------------------------------------------|--------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|----------------------------------------------|--------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input checked="" type="checkbox"/> moderately compact | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> |                                 | clayey <input type="checkbox"/>              | <input type="checkbox"/> clay              |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| <input type="checkbox"/> loose                                    | <input type="checkbox"/> friable                       | brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown                                                           | <input type="checkbox"/> grey   | silty <input checked="" type="checkbox"/>    | <input checked="" type="checkbox"/> silt   |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
|                                                                   |                                                        | greyish <input checked="" type="checkbox"/>                                                                                           | <input type="checkbox"/> grey   | sandy <input type="checkbox"/>               | <input type="checkbox"/> sand              |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
|                                                                   |                                                        | orangeish <input type="checkbox"/>                                                                                                    | <input type="checkbox"/> orange | gravelly <input checked="" type="checkbox"/> | <input checked="" 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                                                         |                                                        |                                                                                                                                       |                                 |                                              |                                            |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| 0-20                                                              |                                                        | 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                                                         | M                                                      |                                                                                                                                       |                                 |                                              |                                            |                          |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| bulk find                                                         | <input type="checkbox"/>                               | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/>        | <input type="checkbox"/>                     | <input type="checkbox"/>                   | <input type="checkbox"/> | <input type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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

### CROSS REFERENCE

### Basic process

| Sample nos                                                                          | Finds nos                                                                           | Photo nos  | Drawing nos                                                                                                                                                                                        | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
|  |  | 81610874-4 | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/><br> | Date 2/02/18<br>Initials WE<br>Checked by                                                                     |

# ADDITIONAL INFORMATION

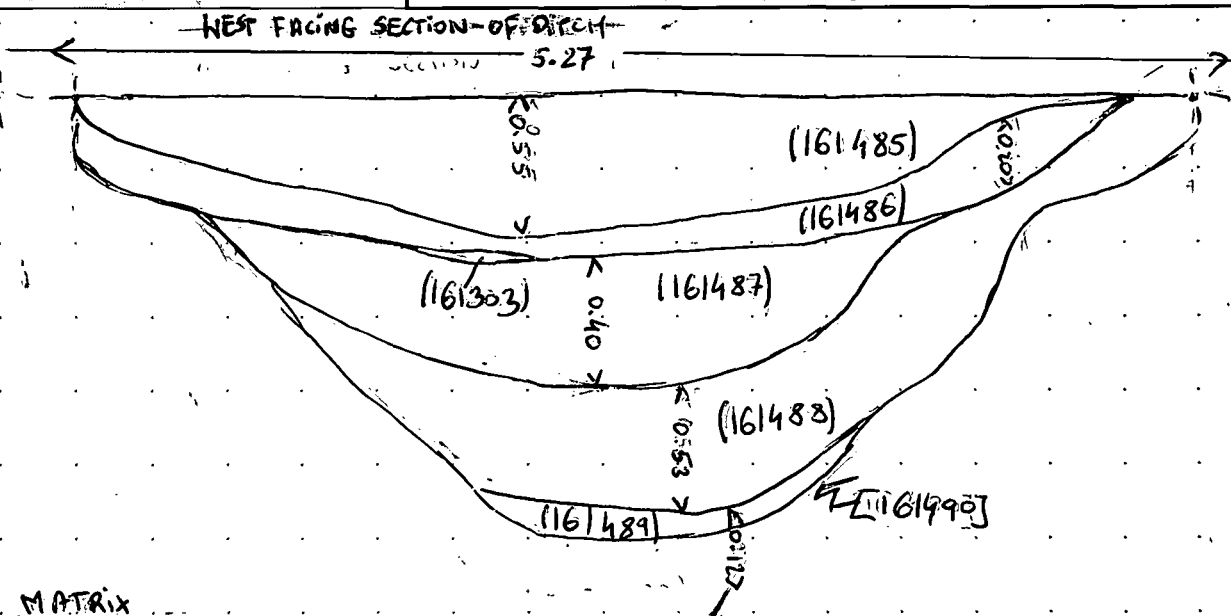
(any further details that may be important for understanding the context, including items marked \* overleaf)

FILL (161486) is a ~~moderately compact~~ <sup>greyish</sup> ~~moderately compact~~ GRAVELLY SILT. THIS FILL APPEARS ONLY ON WEST FACING SECTION OF DITCH SLOT [161490]. IT BLOWS FROM SOUTH TO NORTH. THIS FILL CONTAINED SMALL PIECE OF <sup>THIN</sup> POT (OUTER-BROWN, SECTION-CROSS BLACK, INNER GREY) AND TWO ~~RED~~ <sup>PROBABLY</sup> WORKED FLINTS - ONE OF THEM PRESUMABLY A CORE. UNDER THIS FILL, ON A DEPOSITED THIN LAYER OF CHARCOAL (161303).

Refer to context

## SKETCHES

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



### MATRIX

(161485)  
(161486)  
(161303)  
(161487)  
(161488)  
(161489)  
[161490]

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                   |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/field<br><b>TEA16</b> | Sub-area/trench                   | Context number<br><b>(161487)</b>                                                                                      |
| ECB#                    | Subgroup                   | Parent context<br><b>(161490)</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |                 |  |                 |
|--|--|-----------------|-----------------|--|-----------------|
|  |  | <b>(161486)</b> | <b>(161303)</b> |  | Same as context |
|  |  | <b>(161487)</b> |                 |  | Cuts context    |
|  |  | <b>(161488)</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 checked="" type="checkbox"/> NE-SW<br><input checked="" type="checkbox"/> NW-SE<br><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 checked="" 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                        |
| <input type="checkbox"/> post-hole                  |
| <input type="checkbox"/> stake-hole                 |
| <input type="checkbox"/> ditch                      |
| <input type="checkbox"/> ring-ditch                 |
| <input type="checkbox"/> beam slot                  |
| <input type="checkbox"/> construction cut           |
| <input type="checkbox"/> robber cut                 |
| <input type="checkbox"/> gully                      |
| <input type="checkbox"/> palaeochannel              |
| <input type="checkbox"/> furrow                     |
| <input type="checkbox"/> field boundary             |
| <input type="checkbox"/> burial cut                 |
| <input type="checkbox"/> other cut (describe below) |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                               |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b>                                                                                                                                                | <b>Colour</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Composition</b>                                                                                                                                                                                                                                                                                                                            |
| <input checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | clayey <input type="checkbox"/> <input checked="" type="checkbox"/> clay<br>silty <input type="checkbox"/> <input type="checkbox"/> silt<br>sandy <input type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat |
| <b>Thickness</b>                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                               |
| <b>0.3m</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*<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>6</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                               |
| bulk find                                                                                                                                                        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                           |

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

## CROSS REFERENCE

|            |           |                                          |                                                                                                                                                           |
|------------|-----------|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                | Drawing nos                                                                                                                                               |
|            |           | <b>1616 874-9</b><br><b>1616 876-900</b> | <b>8/15</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>1616 2801</b> |

|                                       |                                                                         |
|---------------------------------------|-------------------------------------------------------------------------|
| <b>Basic process</b>                  |                                                                         |
| construction <input type="checkbox"/> | use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date                                  | <b>2/2/18</b>                                                           |
| Initials                              | <b>WE</b>                                                               |
| Checked by                            |                                                                         |

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

# ADDITIONAL INFORMATION

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

CLAY FILL OF DITCH SLOT [161490], LIKELY WASHED IN AND  
 MIXED WITH WIND BLOWN CHARCOAL. CONTAINS SOME POTTERY  
 THE WEIGHT OF THIS CLAY HAS APPEARED TO COMPRESS THE LOWER FILL  
 AS IT DESCENDS FURTHEST IN THE MIDDLE OF THE DITCH

Refer to context [161490]

## SKETCHES

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

SEE SKETCH (161485) AND (161486)

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                            |                                   |                                                                                                                        |
|-------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench                   | Context number<br><b>(161488)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>[161490]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161487)</b> |  |  | Same as context |
|  |  | <b>(161488)</b> |  |  | Cuts context    |
|  |  | <b>(161491)</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>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 checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input checked="" type="checkbox"/><br>brownish <input 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>0.4 m</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |              |                  |         |              |           |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |              |                  |         |              |           |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
| <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains*</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td>frequency</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> <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 checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | stones*                  | chalk                    | iron pan                 | manganese                | charcoal                            | plant remains*                      | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile                     | glass                    | metal        | industrial waste | lithics | coarse stone | frequency | O | 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 checked="" type="checkbox"/> | <input type="checkbox"/> |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | manganese                | charcoal                 | plant remains*           | wood                     | marine shell                        | bone*                               | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste                    | lithics                  | coarse stone |                  |         |              |           |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
| frequency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 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 checked="" type="checkbox"/> | <input type="checkbox"/> |              |                  |         |              |           |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |              |                  |         |              |           |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                                     |                                     |                          |                          |                          |                          |                          |                          |                          |                                     |                          |

## CROSS REFERENCE

## Basic process

|                                                |                   |                                               |                                                                                                                                                                               |                                                                                                               |
|------------------------------------------------|-------------------|-----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| <b>Sample nos.</b><br>1616874-9<br>1610896-900 | <b>Finds nos.</b> | <b>Photo nos.</b><br>1616874-9<br>1610896-900 | <b>Drawing nos.</b> <b>8/ 25</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D:162801</b> | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| <b>Date:</b> <b>2/2/18</b>                     |                   |                                               |                                                                                                                                                                               | <b>Initials:</b> <b>WE</b>                                                                                    |
| <b>Checked by:</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 SLOT [61490]. MADE OF SILTY CLAY THAT LIKELY  
WASHED INTO THE DITCH, CONTAINED POT, BONE AND LITHICS ~~TO~~ WHICH  
COULD HAVE BEEN DELIBERATELY DISCARDED IN THE DITCH OR \* MORE \* PROBABLY  
WHERE JUST PRESENT ON THE GROUND AND GOT WASHED INTO THE  
DITCH WITH THE CLAY

Refer to context

[61440]

## SKETCHES

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

SEE SKETCH 48 (161485) AND (161486)



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                         |                           |                                   |                                                                                                                        |
|-------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEAK</b> | Sub-area/Trench                   | Context number<br><b>(161489)</b>                                                                                      |
| ECB #                   | Subgroup                  | Parent context<br><b>[161490]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161491)</b> |  |  | Same as context |
|  |  | <b>(161489)</b> |  |  | Cuts context    |
|  |  | <b>[161490]</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>1 <input type="checkbox"/> vertical<br>1 <input type="checkbox"/> steep<br>1 <input type="checkbox"/> moderate<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 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"/> <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>0.22m</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></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | stones*   | chalk    | iron pan       | manganese | charcoal     | plant remains* | wood | marine shell     | bone* | pot            | fired clay / CBM | CTP   | mortar/plaster | leather/textile  | glass   | metal        | industrial waste | lithics | coarse stone |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | manganese | charcoal | plant remains* | wood      | marine shell | bone*          | pot  | fired clay / CBM | CTP   | mortar/plaster | leather/textile  | glass | metal          | industrial waste | lithics | coarse stone |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>frequency</b> <input checked="" type="radio"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <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 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

|                   |                  |                                                            |                                                                                                                                                                               |                                                                                                                                       |
|-------------------|------------------|------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| <b>Sample nos</b> | <b>Finds nos</b> | <b>Photo nos</b><br><b>1616874-9</b><br><b>1610896-400</b> | <b>Drawing nos</b> <b>S# 25</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D: 162801</b> | <b>Basic process</b><br>construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|                   |                  |                                                            |                                                                                                                                                                               | <b>Date</b> <b>2/2/18</b>                                                                                                             |
|                   |                  |                                                            |                                                                                                                                                                               | <b>Initials</b> <b>WE</b>                                                                                                             |
|                   |                  |                                                            |                                                                                                                                                                               | <b>Checked by</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 FILL OF DITCH SLOT [161490]. LIKELY RE DEPOSITED  
NATURAL CLAY WHICH FELL BACK INTO THE DITCH AFTER CONSTRUCT, CONTAINS  
POTTERY. ~~HAS BEEN~~ IS A ~~COMPACT~~ COMPACT SILTY CLAY WHICH FOLLOWS  
THE SOUTHERN SLOPE OF THE DITCH HALF THE WAY ~~FROM~~ TO  
THE SURFACE INDICATING ITS POINT OF ENTRY

Refer to context [161490]

## SKETCHES

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

SEE SKETCH (161485) AND (161486)

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                          |                            |                                   |                                                                                                                        |
|--------------------------|----------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench                   | Context number<br><b>[161490]</b>                                                                                      |
| ECB#                     | Subgroup                   | Parent context<br><b>[161490]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |               |  |                 |
|--|--|-----------------|---------------|--|-----------------|
|  |  | <b>(161491)</b> | <b>161489</b> |  | Same as context |
|  |  | <b>[161490]</b> |               |  | Cuts context    |
|  |  | <b>(161003)</b> |               |  | 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 checked="" 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>held 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 checked="" type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                                 |        |                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| Orientation                                                                                                                                                                                                                                                                             |  | Sides                                                                                                                                                                                                                                                                                                           |        | Base                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| <p>I <input type="checkbox"/> N-S</p> <p>I <input checked="" type="checkbox"/> E-W</p> <p>I <input type="checkbox"/> NE-SW</p> <p>I <input type="checkbox"/> NW-SE</p> <p>N <input checked="" type="checkbox"/></p>                                                                     |  | <p>vertical <input type="checkbox"/></p> <p>steep <input type="checkbox"/></p> <p>moderate <input checked="" type="checkbox"/> sloping</p> <p>gentle <input type="checkbox"/></p> <p>stepped <input type="checkbox"/></p> <p>undercutting <input type="checkbox"/></p> <p>complex* <input type="checkbox"/></p> |        | <p>flat <input type="checkbox"/></p> <p>concave <input checked="" type="checkbox"/></p> <p>v-shaped <input type="checkbox"/></p> <p>sloping <input type="checkbox"/></p> <p>uneven <input type="checkbox"/></p> <p>complex* <input type="checkbox"/></p> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| Dimensions                                                                                                                                                                                                                                                                              |  | Length                                                                                                                                                                                                                                                                                                          | Width  | Depth                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| in metres                                                                                                                                                                                                                                                                               |  | ~ 50m                                                                                                                                                                                                                                                                                                           | ~ 3.5m | 0.84m                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| 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                                                                                                                                                                                                                  |  | <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</p> <p>greyish <input type="checkbox"/> grey</p> <p>orangeish <input type="checkbox"/> orange</p> <p>yellowish <input type="checkbox"/> yellow</p> <p>reddish <input type="checkbox"/> red</p> <p>blueish <input type="checkbox"/> blue</p> |  | <p>clayey <input type="checkbox"/> clay</p> <p>silty <input type="checkbox"/> silt</p> <p>sandy <input type="checkbox"/> sand</p> <p>gravelly <input type="checkbox"/> gravel</p> <p>peaty <input type="checkbox"/> peat</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* <input type="checkbox"/></p> <p>chalk <input type="checkbox"/></p> <p>iron pipe <input type="checkbox"/></p> <p>manganese <input type="checkbox"/></p> <p>charcoal <input type="checkbox"/></p> <p>plant remains* <input type="checkbox"/></p> <p>wood <input type="checkbox"/></p> <p>marine shell <input type="checkbox"/></p> <p>bone* <input type="checkbox"/></p> <p>pot <input type="checkbox"/></p> <p>fired clay / CBM <input type="checkbox"/></p> <p>CTP <input type="checkbox"/></p> <p>mortar/plaster <input type="checkbox"/></p> <p>leather/textile <input type="checkbox"/></p> <p>glass <input type="checkbox"/></p> <p>metal <input type="checkbox"/></p> <p>industrial waste <input type="checkbox"/></p> <p>lithics <input type="checkbox"/></p> <p>coarse stone <input type="checkbox"/></p> |  |                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| frequency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |

## CROSS REFERENCE

|            |           |                  |                                                                                                           |
|------------|-----------|------------------|-----------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos        | Drawing nos                                                                                               |
|            |           | <b>1610874-9</b> | <b>1610896-400</b>                                                                                        |
|            |           |                  | Surveyed:                                                                                                 |
|            |           |                  | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|            |           |                  | <b>D: 16281</b>                                                                                           |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>2/2/18</b>                                                                                            |
| Initials <b>WE</b>                                                                                            |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

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

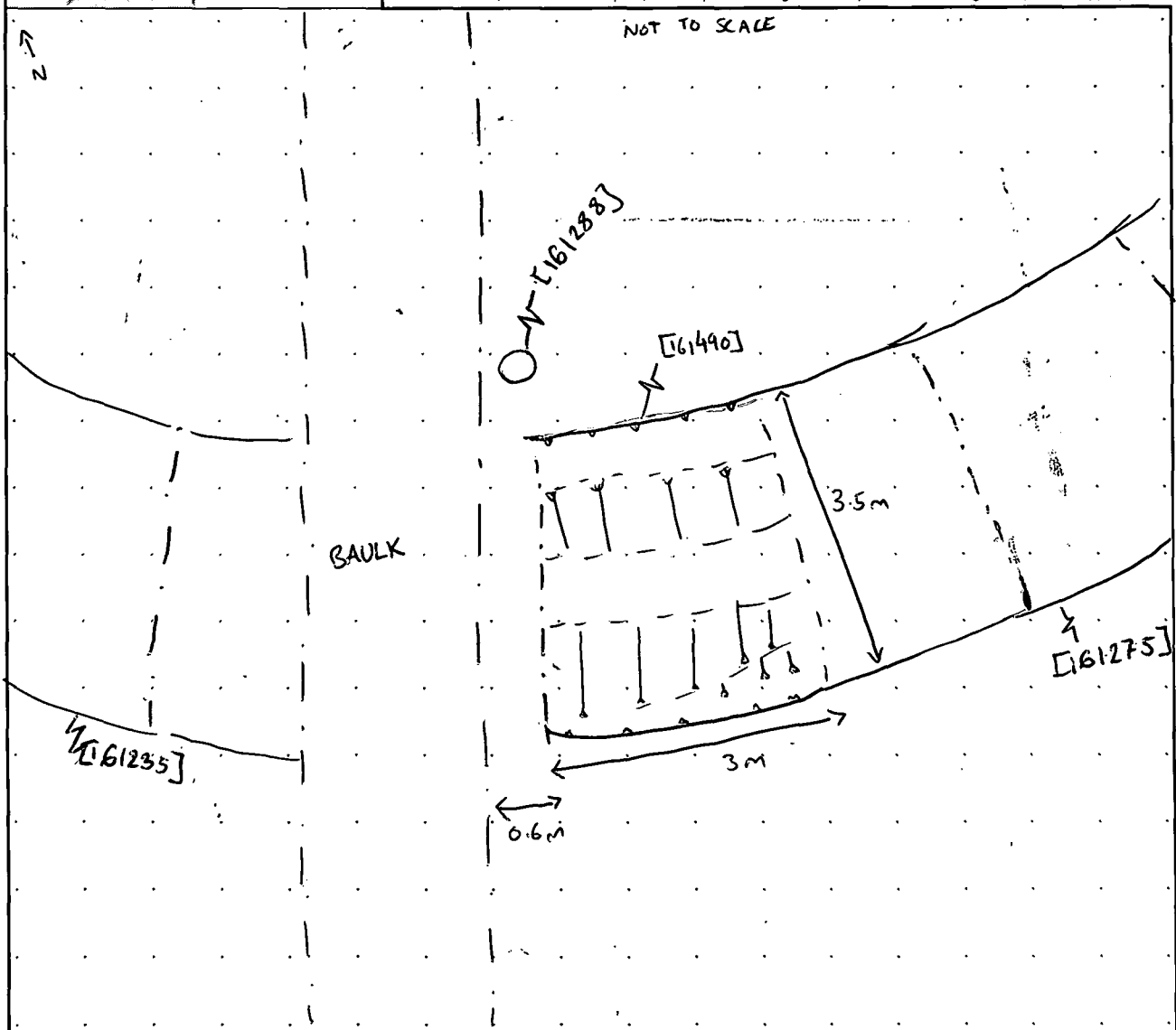
CUT OF OUTER DITCH OF BARROW. SLOT IN THE SOUTHERN PART OF DITCH TO THE EAST OF THE BAULK HAS MODERATELY SLOPING SIDES THAT APPEAR TO UNDULATE, BUT THIS IS LIKELEY DUE TO NATURAL SLUMPING AND EDGE ERROSION OF GRAVELS MAKING THE SIDES. BASE IS CONCAVE AND REGULAR

Refer to context

(161485) (161486)

## 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>TEA16</b> | Sub-area/trench                  | Context number<br><b>(161491)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>1614901</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161488)</b> |  |  | Same as context |
|  |  | <b>(161491)</b> |  |  | Cuts context    |
|  |  | <b>(161489)</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>                                                                                                                                   | <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>                                                                                                                                                                                                                                                                            | <b>Length</b>                                                                                                                                                                                                                                                                 | <b>Width</b>                                                                                                                                                                                                                      | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 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 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 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"/> | 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>0.21m</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 <b>M</b><br>bulk find <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |                                 |                                                                                                                                                                       |
|------------|-----------|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos<br><b>1610896-900</b> | Drawing nos <b>SF 25</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D1162810</b> |
|------------|-----------|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>02/02/18</b>                                                                                                     |
| Initials <b>WE</b>                                                                                                       |
| Checked by                                                                                                               |

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

# ADDITIONAL INFORMATION

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

SECONDARY FILL OF DITCH SLOT [161490] A SILTY SAND DEPOSIT  
 FOUND ON THE TOP OF SOUTHERN EDGE LIKELY FORMED BY EDGE  
 EROSION DUE TO WEATHER. IS NOT PRESENT ON THE WEST  
 FACING SECTION. LIKELY JUST SMALL SCALE EROSION.

Refer to context

[161490]

## SKETCHES

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

SEE SKETCH (161485)

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                          |                             |                                 |                                                                                                                        |
|--------------------------|-----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A 14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench                 | Context number<br><b>(161492)</b>                                                                                      |
| LCB#                     | Subgroup                    | Parent context<br><b>161493</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                     |                 |  |                              |
|--|--|---------------------|-----------------|--|------------------------------|
|  |  | <b>161122</b>       |                 |  | Same as context              |
|  |  | <del>(161122)</del> | <b>(161492)</b> |  | Cuts context                 |
|  |  | <b>161493</b>       |                 |  | Cut by context <b>161122</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>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 checked="" type="checkbox"/> brown<br>greyish <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> red<br>blueish <input type="checkbox"/> blue | <b>Composition</b><br>clayey <input type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input 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 checked="" type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><b>0, 25</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                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 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 <b>D16167</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>8# 29</b> |
|------------|-----------|-----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>5.2.18</b><br>Initials <b>FG</b><br>Checked by                                                        |

# ADDITIONAL INFORMATION

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

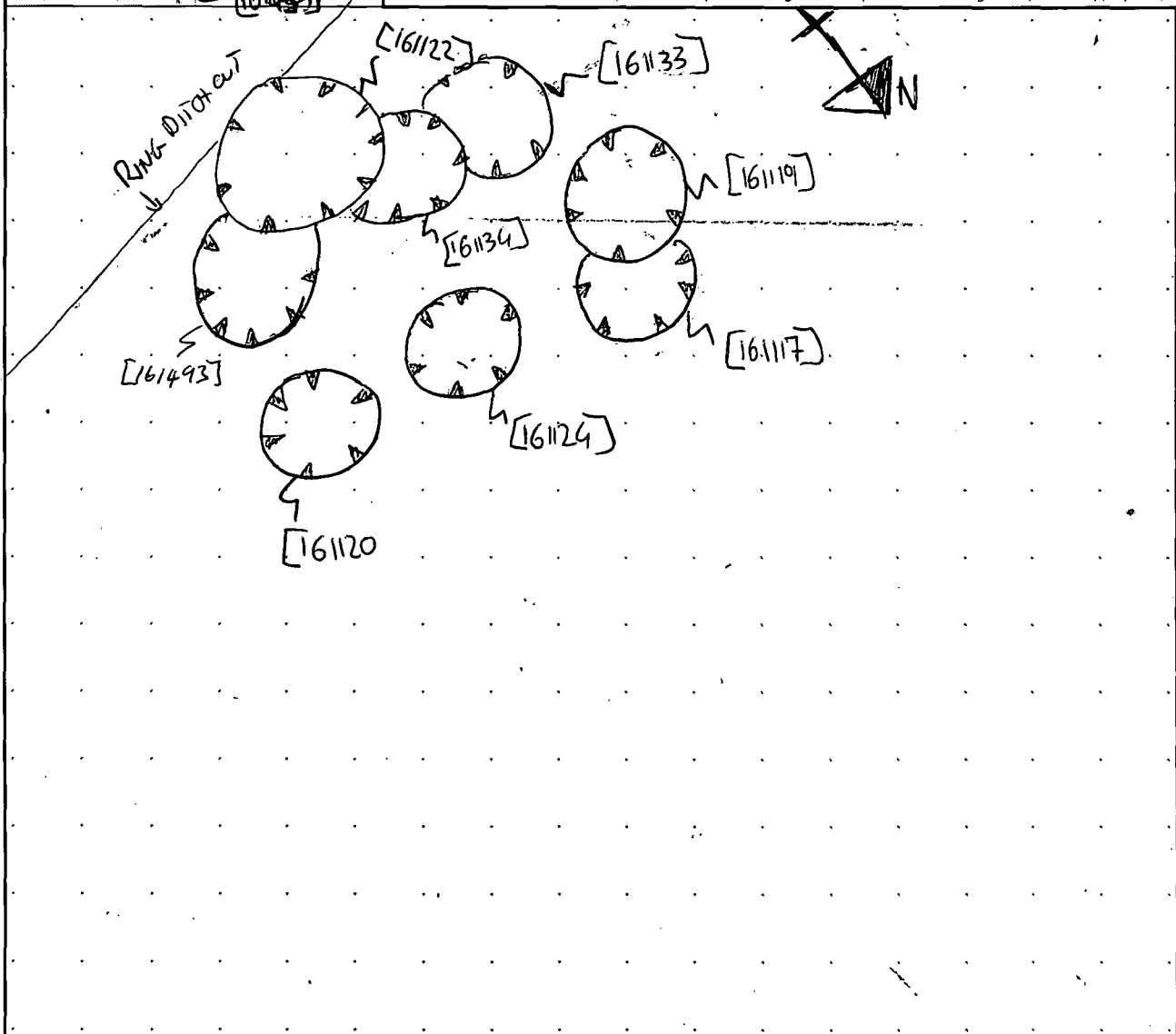
FILL OF A ORATION VERY BLACK BROWNISH  
FILL THERE ARE SOME BONES AND A FEW PIECES  
OF CBM. IT IS REALLY HARD TO SEPARATE THIS FILL  
TO THE FILL OF THE [161122].

Refer to context

[161122]  
[161133]

## SKETCHES

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



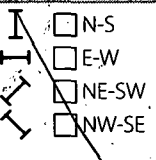


## STRATIGRAPHY

|  |  |          |  |  |                 |         |
|--|--|----------|--|--|-----------------|---------|
|  |  | (161492) |  |  | Same as context |         |
|  |  | (161493) |  |  | Cuts context    | (61003) |
|  |  | (161003) |  |  | 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 checked="" 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 checked="" type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |                      | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br>/ | <b>Width</b><br>/                                                                                                                                                                                                                                                                        | <b>Depth</b><br>0,25 | <b>Diameter</b><br>0,45                                                                                                                                                                                                                      |
| <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

| Compaction                                                        |                                             | Colour                                                                                                                     |                                 | Composition                       |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|---------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|---------------------------------|-----------------------------------|---------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input type="checkbox"/> moderately 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"/> loose                                    | <input type="checkbox"/> friable            | brownish <input type="checkbox"/> brown                                                                                    | <input type="checkbox"/> brown  | silty <input type="checkbox"/>    | <input type="checkbox"/> silt   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | greyish <input type="checkbox"/> grey                                                                                      | <input type="checkbox"/> grey   | sandy <input type="checkbox"/>    | <input type="checkbox"/> sand   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | orangeish <input type="checkbox"/> orange                                                                                  | <input type="checkbox"/> orange | gravelly <input type="checkbox"/> | <input type="checkbox"/> gravel |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | yellowish <input type="checkbox"/> yellow                                                                                  | <input type="checkbox"/> yellow | peaty <input type="checkbox"/>    | <input type="checkbox"/> peat   |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | reddish <input type="checkbox"/> red                                                                                       | <input type="checkbox"/> red    |                                   |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                             | blueish <input type="checkbox"/> blue                                                                                      | <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                                                         |                                             |                                                                                                                            |                                 |                                   |                                 |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 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                                                                                                                                      | construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
|------------|-----------|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| /          | /         | /         | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>SHEET 12 D16167</b> | Date <b>5.2.18</b><br>Initials <b>PG</b><br>Checked by                                                        |

# ADDITIONAL INFORMATION

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

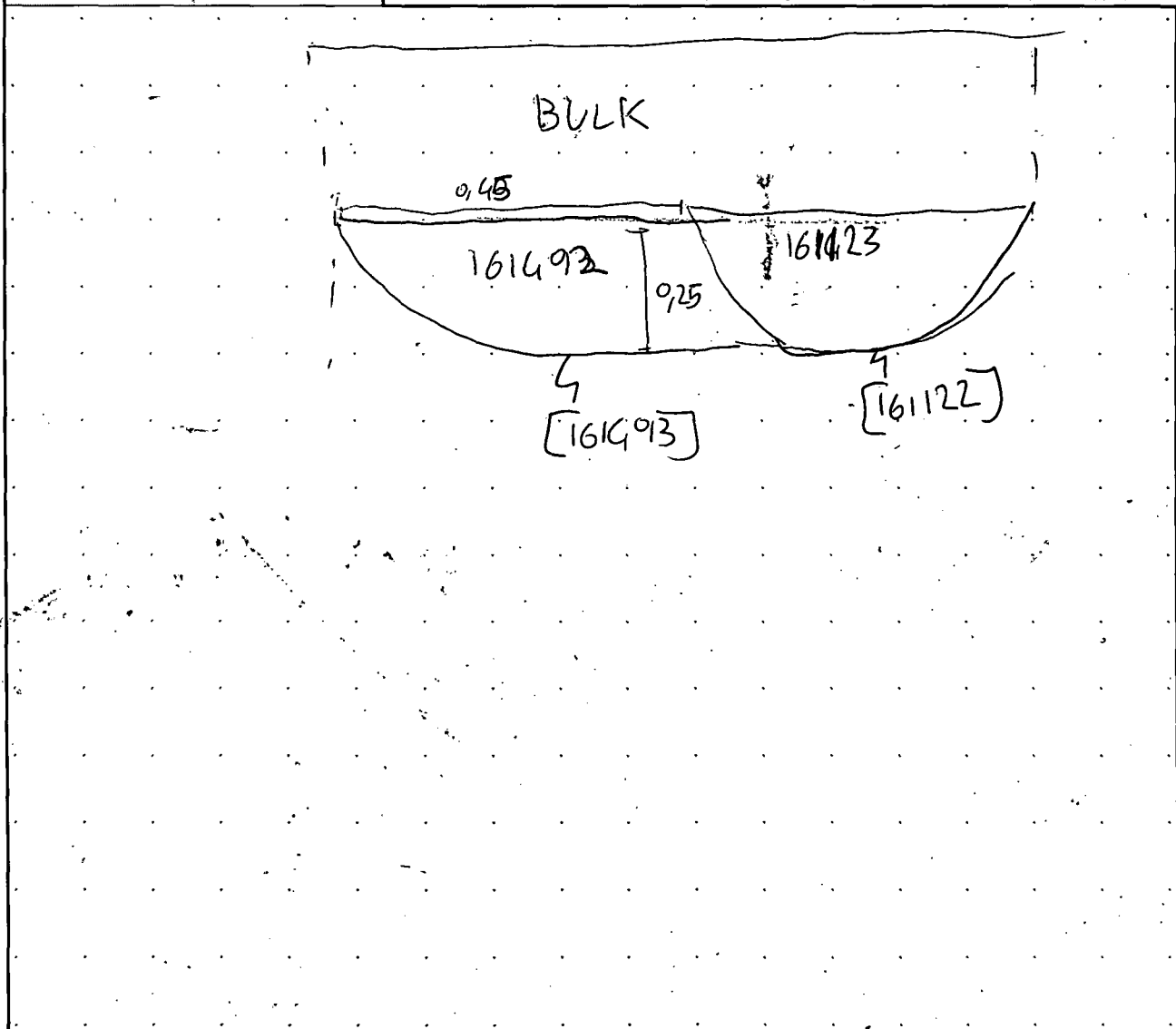
CUT OF A OPERATION PART OF A CLUSTER.

IT SEEMS THAT THIS CUT AND ITS FILL ARE MADE BEFORE [161122] AS IT SHOWS THE SUCCESSIVE DIG OF (161123)

Refer to context [161122]

## SKETCHES

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



# MOLA HEADLAND INFRASTRUCTURE



Fill of lines  
CONTEXT SHEET

|                          |            |                          |                                                                                                                        |
|--------------------------|------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>TEA16 - A14 | Area/Field | Sub-area/Trench          | Context number<br>161494                                                                                               |
| ECB #                    | Subgroup   | Parent context<br>161495 | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 161499 |  |  | Same as context |
|  |  | 161494 |  |  | Cuts context    |
|  |  | 161495 |  |  | 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<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 checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input checked="" type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> |                          |
| Thickness                                                                                                                                                        | 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                                                                                                                                                        | M                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | M                                                                                                                                                                                                                                                                                                                                                        |                          |
| bulk find                                                                                                                                                        | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> |

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

## CROSS-REFERENCE

|                                                                                                                        |           |                    |                     |
|------------------------------------------------------------------------------------------------------------------------|-----------|--------------------|---------------------|
| Sample nos                                                                                                             | Finds nos | Photo nos          | Drawing nos         |
|                                                                                                                        |           | 1610905<br>1610906 | 1626<br>D16282 8#26 |
| Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |           |                    |                     |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date 5/2/18                                                                                                   |
| Initials BR                                                                                                   |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

Fill of possible lines [161495] no date  
Material recovered More Stone than surrounding  
Contexts, and a little debris also

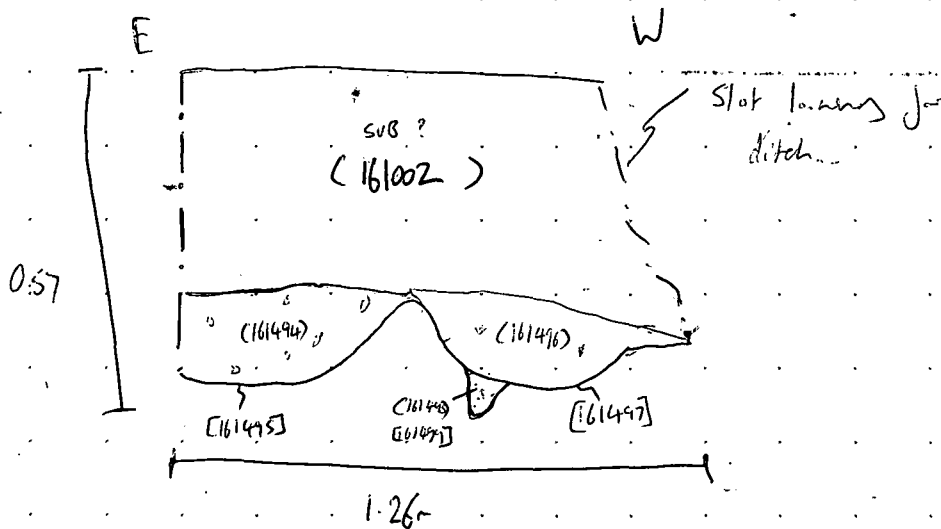
Will need further research/investigation when  
are stripped by machine.

Refer to context

## SKETCHES

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

N FACENT SKETCH SECT



# MOLA HEADLAND INFRASTRUCTURE



## Context sheet

|                        |            |                          |                                                                                                                        |
|------------------------|------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br>TEA16 A14 | Area/Field | Sub-area/Trench          | Context number<br>161495                                                                                               |
| ECB#                   | Subgroup   | Parent context<br>161495 | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 161494 |  |  | Same as context |
|  |  | 161495 |  |  | Cuts context    |
|  |  |        |  |  | Cut by context  |

### CUT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                       |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                       |                 | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>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>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate sloping<br>I <input checked="" 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 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>0.85m (JFE)                                                                                                                                                                                                                                                                                   | <b>Width</b><br>0.60m                                                                                                                                                                                                                                    | <b>Depth</b><br>0.20m | <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 checked="" 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 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<br>1610735 + 6 | Drawing nos<br>16282                                                                                                                 |
|            |           |                          | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>16282 S#26 |

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date<br>5/2/18                                                                                                |
| Initials<br>SL                                                                                                |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

Possible linear cut, very shallow, possibly drainage  
related.

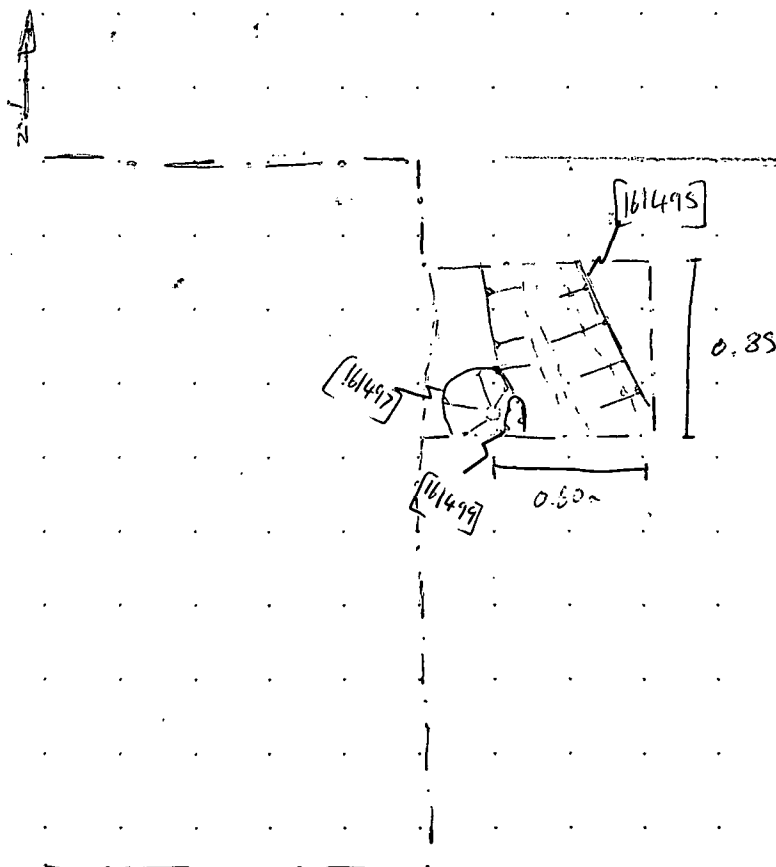
However unable to say for sure as area needs stripping  
by machine before we can see the full extent  
of the feature.

No datable material recovered from fill (61494)

Refer to context

## SKETCHES

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





# MOLA HEADLAND INFRASTRUCTURE



Fill of pit  
CONTEXT SHEET

|                               |            |                                 |                                                                                                                        |
|-------------------------------|------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>HEALB A14</b> | Area/Field | Sub area/trench                 | Context number<br><b>161496</b>                                                                                        |
| ECB#                          | Subgroup   | Parent context<br><b>161497</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |  |
|--|--|---------------|--|--|-----------------|--|
|  |  |               |  |  | Same as context |  |
|  |  | <b>161496</b> |  |  | Cuts context    |  |
|  |  | <b>161497</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 checked="" 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 checked="" type="checkbox"/> w-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<br>greyish <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> red<br>blueish <input type="checkbox"/> blue |           | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input checked="" type="checkbox"/><br>silty <input checked="" type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat |                | 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>0.15m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |       | 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>O</td> <td></td> <td></td> <td></td> <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> </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 |  |  |  | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |       |                                                                                                                                                                                                                                                                                                                                                                                                                                  |           | O                                                                                                                                                                                                                                                                                     |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |         |              |          |           |                  |                |                |                 |       |       |                  |         |                |                 |       |       |                  |         |              |   |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>frequency</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |       |                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                                                                                                                                                                                                                                                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |         |              |          |           |                  |                |                |                 |       |       |                  |         |                |                 |       |       |                  |         |              |   |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>bulk find</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |       |                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |                                                                                                                                                                                                                                                                                       |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |         |              |          |           |                  |                |                |                 |       |       |                  |         |                |                 |       |       |                  |         |              |   |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

## CROSS REFERENCE

|                                                                                                                                          |           |           |             |
|------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|-------------|
| Sample nos                                                                                                                               | Finds nos | Photo nos | Drawing nos |
|                                                                                                                                          |           | 161090586 | 161090586   |
| Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16282<br>S496 |           |           |             |

## Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date 3/2/18                                                                                                              |
| Initials SR                                                                                                              |
| Checked by                                                                                                               |

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



# ADDITIONAL INFORMATION

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

Fill of possible small pit although unsure  
until the area is stripped

No dating material recovered

Refer to context

## SKETCHES

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

SEE: 161494 & 161495

# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                         |                             |                                 |                                                                                                                        |
|-------------------------|-----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench                 | Context number<br><b>161497</b>                                                                                        |
| ECB #                   | Subgroup                    | Parent context<br><b>111497</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |               |               |               |  |                            |
|--|---------------|---------------|---------------|--|----------------------------|
|  |               | <b>161496</b> |               |  | Same as context            |
|  |               | <b>161497</b> |               |  | Cuts context <b>161498</b> |
|  | <b>161498</b> | <b>161499</b> | <b>161500</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 checked="" type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                               |                             |  | pit <input checked="" type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam-slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input 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 checked="" 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>0.40</b>                                                                                                                                                                                                                                                                           | <b>Width</b><br><b>0.45</b>                                                                                                                                                                                                                   | <b>Depth</b><br><b>0.15</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<br>greyish <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> red<br>blueish <input type="checkbox"/> blue<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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                     | stones* <input type="checkbox"/> chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/> manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/> plant remains* <input type="checkbox"/><br>wood <input type="checkbox"/> marine shell <input type="checkbox"/><br>bone* <input type="checkbox"/> pot <input type="checkbox"/><br>fired clay / CBM <input type="checkbox"/> CTP <input type="checkbox"/><br>mortar/plaster <input type="checkbox"/> leather/textile <input type="checkbox"/><br>glass <input type="checkbox"/> metal <input type="checkbox"/><br>industrial waste <input type="checkbox"/> lithics <input type="checkbox"/><br>coarse stone <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>frequency</b>                                                                                                                                                           | bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

### CROSS REFERENCE

|             |            |                 |                                                                                                                                                         |
|-------------|------------|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos. | Finds nos. | Photo nos.      | Drawing nos. <b>11266</b>                                                                                                                               |
|             |            | <b>16109056</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16282</b><br><b>st 26</b> |

### Basic process

construction ☒ use ☐ disuse ☐

Date **5/2/18**

Initials **SR**

Checked by

# ADDITIONAL INFORMATION

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

Possible pit although not wholly convincing.

Runs into section section and possibly cuts lined  
[161495]

No datable material recovered from J11 (161496)

Refer to context

SKETCHES

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

SEE 161494 & 161495

# MOLA HEADLAND INFRASTRUCTURE



## Fill & gully CONTEXT SHEET

|                                 |            |                                 |                                                                                                                        |
|---------------------------------|------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>FEA16 - A14</b> | Area/Field | Sub-area/Trench                 | Context number<br><b>161498</b>                                                                                        |
| ECB #                           | Subgroup   | Parent context<br><b>161499</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161497</b> |  |  | Same as context |
|  |  | <b>161498</b> |  |  | Cuts context    |
|  |  | <b>161499</b> |  |  | Cut by context  |

### CUT

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

### DESCRIPTION

### INTERPRETATION

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

### FILL/DEPOSIT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input checked="" type="checkbox"/> loose<br><input type="checkbox"/> friable                                                            | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown<br>greyish <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> red<br>blueish <input type="checkbox"/> blue | <b>Composition</b><br>clayey <input type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input checked="" type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br>0-10cm                                                                                                                                                                                                                       | 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 |                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>frequency</b><br>bulk find                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

### CROSS REFERENCE

|            |           |                    |                                                                                                                                                      |
|------------|-----------|--------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos          | Drawing nos <b>16226</b>                                                                                                                             |
|            |           | <b>1610905 + 6</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16282</b> <b>S# 26</b> |

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>5/2/18</b>                                                                                            |
| Initials <b>SR</b>                                                                                            |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

Fill of small possible gully (See 161499)

No datable material

Refer to context

## SKETCHES

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

SEE 161494 & 161495



|                                 |            |                                 |                                                                                                                        |
|---------------------------------|------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>TEAL6 - A14</b> | Area/Field | Sub-area/Trench                 | Context number<br><b>161499</b>                                                                                        |
| ECR#                            | Subgroup   | Parent context<br><b>161494</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161498</b> |  |  | Same as context |
|  |  | <b>161499</b> |  |  | Cuts context    |
|  |  | <b>161494</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 checked="" 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                                                                                                           | <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* |                 |
| <b>Dimensions</b>                                                                                                                                                                                                                                                                       | <b>Length</b>                                                                                                                                                                                                                                                 | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                       | <b>Diameter</b> |
| in metres                                                                                                                                                                                                                                                                               | <b>0.30-</b>                                                                                                                                                                                                                                                  | <b>0.15m</b> | <b>0.10m</b>                                                                                                                                                                                                       |                 |
| <b>Shape result of:</b> (tick all that apply)                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                               |              |                                                                                                                                                                                                                    |                 |
| design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input checked="" 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)

*pos natural feature*

**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 | <input type="checkbox"/> light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled<br><input type="checkbox"/> brownish <input type="checkbox"/> brown<br><input type="checkbox"/> greyish <input type="checkbox"/> grey<br><input type="checkbox"/> orangeish <input type="checkbox"/> orange<br><input type="checkbox"/> yellowish <input type="checkbox"/> yellow<br><input type="checkbox"/> reddish <input type="checkbox"/> red<br><input type="checkbox"/> blueish <input type="checkbox"/> blue |                 | <input type="checkbox"/> clayey <input type="checkbox"/> clay<br><input type="checkbox"/> silty <input type="checkbox"/> silt<br><input type="checkbox"/> sandy <input type="checkbox"/> sand<br><input type="checkbox"/> gravelly <input type="checkbox"/> gravel<br><input type="checkbox"/> peaty <input type="checkbox"/> peat |              |
| <b>Thickness</b>                                                                                                                                      | <input type="checkbox"/> black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                          |                 | <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                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |                                                                                                                                                                                                                                                                                                                                    |              |

- ☐ 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**

|                                                                                                                                                      |                  |                  |                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------|--------------------|
| <b>Sample nos</b>                                                                                                                                    | <b>Finds nos</b> | <b>Photo nos</b> | <b>Drawing nos</b> |
|                                                                                                                                                      |                  | <b>1610905+6</b> | <b>1610905+6</b>   |
| Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16282</b> <b>SA 26</b> |                  |                  |                    |

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| <b>Basic process</b>                                                                                          |
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| <b>Date</b> <b>5/2/15</b>                                                                                     |
| <b>Initials</b> <b>SR</b>                                                                                     |
| <b>Checked by</b>                                                                                             |

# ADDITIONAL INFORMATION

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

Possible small gully. However, not very convincing.

More likely natural feature, created by water processes.

Will be easier to see when area stripped.

Refer to context

## SKETCHES

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

SEE 161494 & 161495



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                               |                           |                                    |                                                                                                                        |
|-------------------------------|---------------------------|------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 T6A16</b> | Area/Field<br><b>BND5</b> | Sub-area/Trench                    | Context number<br><b>(161500)</b>                                                                                      |
| ECB #                         | Subgroup                  | Parent context<br><b>[161505]?</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |                 |
|--|--|---------------|--|-----------------|
|  |  |               |  | Same as context |
|  |  | <b>161500</b> |  | Cuts context    |
|  |  | <b>161501</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                                                                                                                               | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input type="checkbox"/> moderate<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input checked="" type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input checked="" type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input 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>0.23m (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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| frequency <b>0</b><br>bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |

## CROSS REFERENCE

|            |           |                  |                                                                                                           |
|------------|-----------|------------------|-----------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos        | Drawing nos                                                                                               |
|            |           | 1610914-100-0825 | Surveyed:                                                                                                 |
|            |           | 1610915-100-0824 | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|            |           | 1610916-100-0825 | D16262                                                                                                    |
|            |           | 1610917-100-0826 | #125                                                                                                      |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> misuse <input checked="" type="checkbox"/> |
| Date: <b>8/2/18</b>                                                                                           |
| Initials: <b>HKB</b>                                                                                          |
| Checked by:                                                                                                   |

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

# ADDITIONAL INFORMATION

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

MODERATELY COMPACTED, Friable SANDY SILT WITH INCLUSIONS OF OCE. SMALL ROUNDED AND ANGULAR PEBBLES AND OCE. ROOT FRAGS. POSSIBLY DELIBERATE BACKFILL?

[161505]

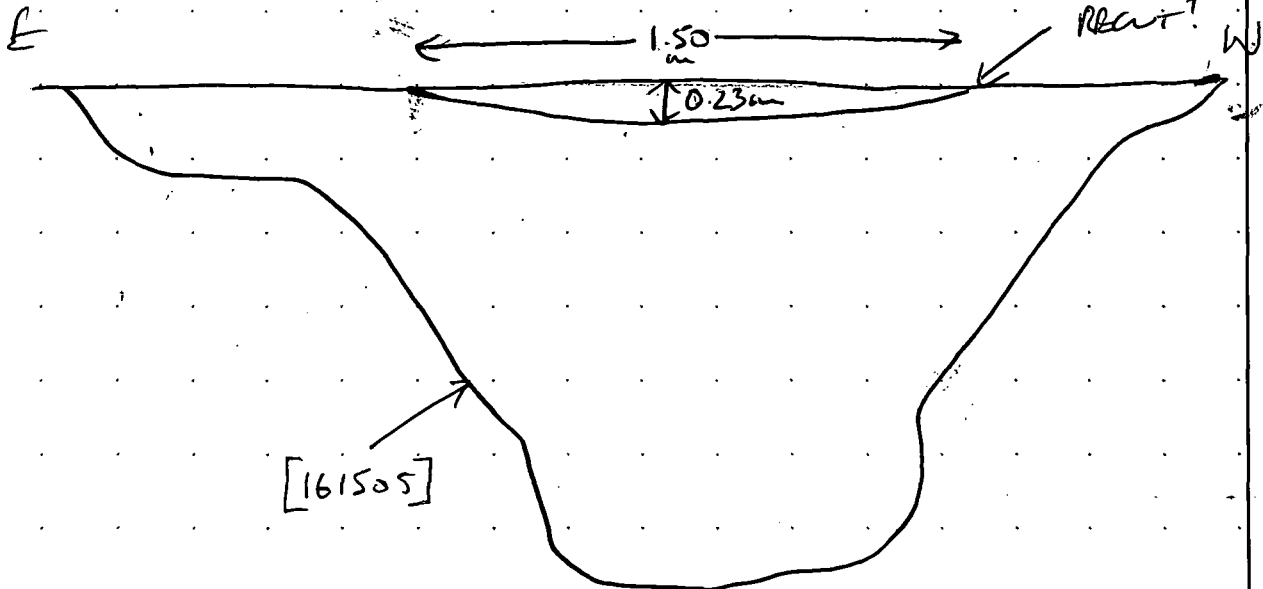
## SKETCHES

Refer to context [161505]

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

NORTH FACING

CONTEXT NO.  
NOT TAKEN BECAUSE  
OF UNCERTAINTY  
RECT?



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                                |                           |                                   |                                                                                                                        |
|--------------------------------|---------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 TEA 16</b> | Area/Field<br><b>BN05</b> | Sub-area/Trench                   | Context number<br><b>(161501)</b>                                                                                      |
| ECB #                          | Subgroup                  | Parent context<br><b>[161505]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |               |               |  |  |                                  |
|--|---------------|---------------|--|--|----------------------------------|
|  | <b>161507</b> | <b>161500</b> |  |  | Same as context                  |
|  |               | <b>161501</b> |  |  | Cuts context                     |
|  |               | <b>161502</b> |  |  | Cut by context <b>[161507]</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                                                                                                                                       | <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 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 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 type="checkbox"/> clay<br>silty <input type="checkbox"/> <input checked="" type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> <input type="checkbox"/> peat                                                                                                                                                                                                                                                                                                        | <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>0.16m</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>0</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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |                                                                                                          |                                                                                                                                               |
|------------|-----------|----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                                                                                | Drawing nos <b>SH 95</b>                                                                                                                      |
|            |           | <b>1610914-100-0825</b><br><b>1610915-100-0824</b><br><b>1610916-100-0825</b><br><b>1610917-100-0826</b> | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D: WD. 16262</b> |

|                                                                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------|
| <b>Basic process</b><br>construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>8/2/18</b>                                                                                                                    |
| Initials <b>HRS</b>                                                                                                                   |
| Checked by                                                                                                                            |

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

# ADDITIONAL INFORMATION

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

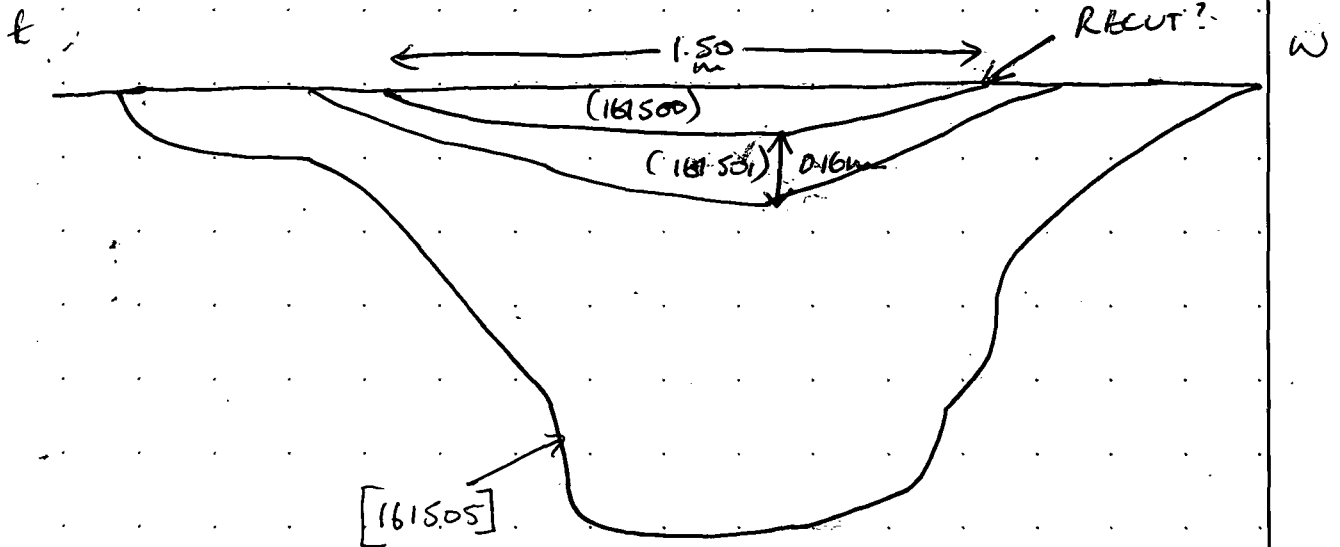
COMPACTED, MID GREYISH BROWN SANDY SILT WITH AN OCC. INCLUSION OF CHARCOAL AND SMALL ANGULAR PEBBLES. 0.16m THICK POSSIBLY REPRESENTS A PERIOD OF SILTING UP WITHIN DITCH DUE TO NATURAL AGENCIES.

Refer to context [161505]

## SKETCHES

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

NORTH FACING



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                               |                        |                                 |                                                                                                                        |
|-------------------------------|------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 TBA16</b> | Area/Field<br><b>S</b> | Sub-area/Trench                 | Context number<br><b>(161502)</b>                                                                                      |
| ECB #                         | Subgroup               | Parent context<br><b>161505</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161501</b> |  |  | Same as context |
|  |  | <b>161502</b> |  |  | Cuts context    |
|  |  | <b>161503</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<br>I <input type="checkbox"/> gentle<br>I <input type="checkbox"/> stepped<br>I <input type="checkbox"/> undercutting<br>I <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>I <input type="checkbox"/> concave<br>I <input type="checkbox"/> v-shaped<br>I <input type="checkbox"/> sloping<br>I <input type="checkbox"/> uneven<br>I <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                               | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input 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"/> | <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>0.54m</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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | stones* <b>M</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | bulk find <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 |
|            |           | 1610914-100-0823 | 25          |
|            |           | 1610915-100-0824 |             |
|            |           | 1610916-100-0825 |             |
|            |           | 1610916-100-0826 |             |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date: <b>9/2/18</b>                                                                                           |
| Initials: <b>HCB</b>                                                                                          |
| Checked by:                                                                                                   |

# ADDITIONAL INFORMATION

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

MODERATELY COMPACTED, MID GREYISH BROWN SANDY SILT  
WITH GRAVEL - 0.5m THICK. POSSIBLY, DELIBERATE  
BACKFILLING OR SOIL CREEP FROM POSSIBLE BANK?

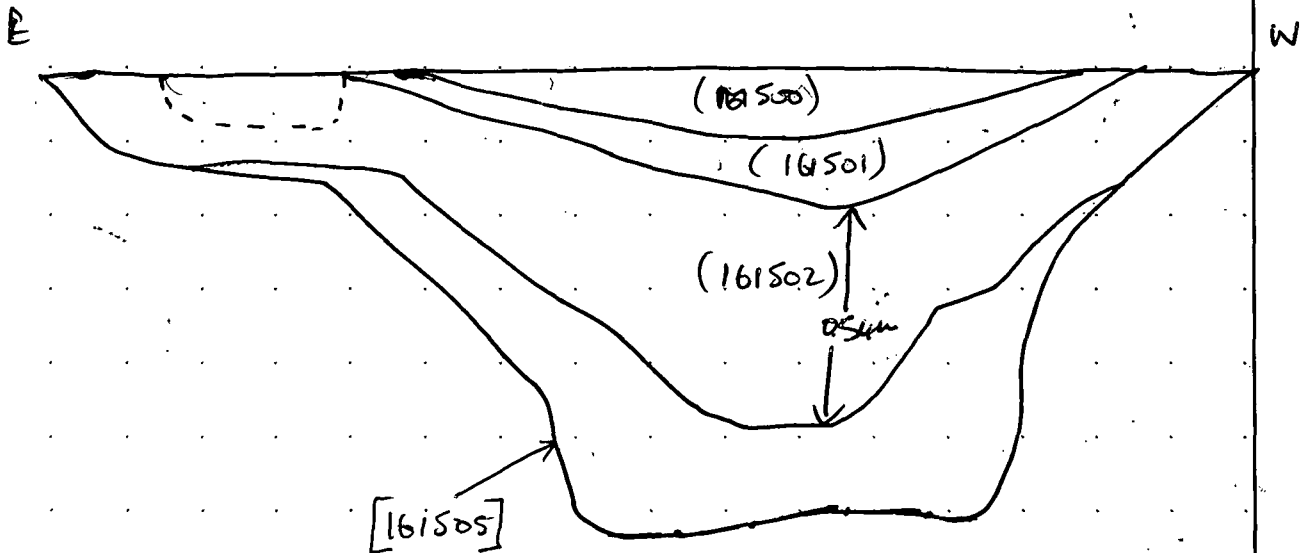
Refer to context

[161505]

## SKETCHES

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

NORTH FACING SECTION.





# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                                |            |                                 |                                                                                                             |
|--------------------------------|------------|---------------------------------|-------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 TEA 16</b> | Area/Field | Sub-area/Trench                 | Context number<br><b>(161503)</b>                                                                           |
| ECB#                           | Subgroup   | Parent context<br><b>161505</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161502</b> |  |  | Same as context |
|  |  | <b>161503</b> |  |  | Cuts context    |
|  |  | <b>161504</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"/> |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 | bit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br>I <input type="checkbox"/> N-S<br>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE<br>N                                                                                                                          | <b>Sides</b><br>1 <input type="checkbox"/> vertical<br>1 <input type="checkbox"/> steep<br>1 <input type="checkbox"/> moderate sloping<br>1 <input type="checkbox"/> gentle<br>1 <input type="checkbox"/> stepped<br>1 <input type="checkbox"/> undercutting<br>1 <input type="checkbox"/> complex* | <b>Base</b><br>1 <input type="checkbox"/> flat<br>1 <input type="checkbox"/> concave<br>1 <input type="checkbox"/> v-shaped<br>1 <input type="checkbox"/> sloping<br>1 <input type="checkbox"/> uneven<br>1 <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                       | <b>Width</b>                                                                                                                                                                                                                                  | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of:</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                      |                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                               |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input checked="" type="checkbox"/><br>brownish <input 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"/> | 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 - 0.32m</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>0</b>                                                                                                                                                                    | bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |

### CROSS REFERENCE

### Basic process

|            |           |                                                                              |                                                                                                                                        |                                                                                                               |
|------------|-----------|------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                                                    | Drawing nos <b>8/25</b>                                                                                                                | construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
|            |           | 1610914-100-0823<br>1610915-100-0824<br>1610916-100-0825<br>1610917-100-0826 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D. NO. 16262 | Date <b>8/2/18</b><br>Initials <b>HEB</b><br>Checked by                                                       |

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



# ADDITIONAL INFORMATION

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

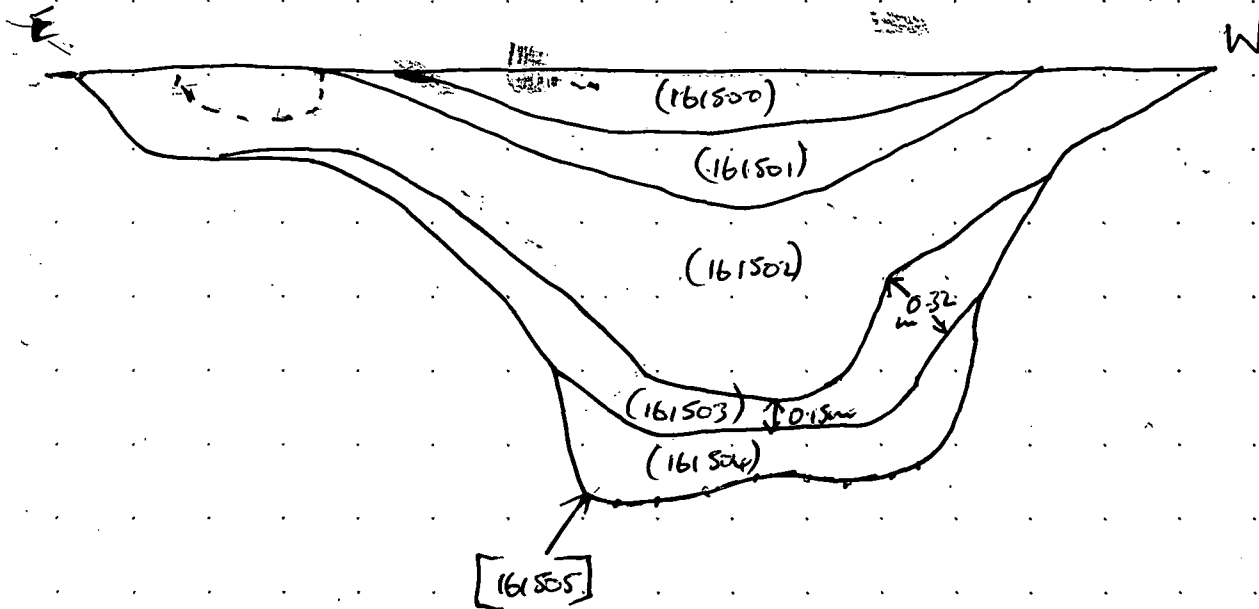
COMPACTED, MID ORANGEY BROWN MOTTLED SANDY SILT WITH OCC. SMALL ROUNDED AND ANGULAR PEBBLES. 0.15m - 0.32m THICK FIN MAY REPRESENT EROSION FROM SIDES OF DITCH

Refer to context [161505]

## SKETCHES

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

### NORTH FACING SECTION



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|                                |                           |                                 |                                                                                                                        |
|--------------------------------|---------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 TEA.16</b> | Area/Field<br><b>BND5</b> | Sub-area/Trench                 | Context number<br><b>(161504)</b>                                                                                      |
| ECB.#                          | Subgroup                  | Parent context<br><b>161505</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |
|--|--|---------------|--|--|-----------------|
|  |  | <b>161503</b> |  |  | Same as context |
|  |  | <b>161504</b> |  |  | Cuts context    |
|  |  | <b>161505</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>Shape result of:</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                      |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------|------------------|---------|--------------|-----------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-----------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input checked="" type="checkbox"/><br>brownish <input type="checkbox"/> brown<br>greyish <input checked="" type="checkbox"/> grey<br>orangeish <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> red<br>blueish <input type="checkbox"/> blue | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay<br>silty <input type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> sand<br>gravelly <input type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat | <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>0.12m - 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <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>0</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 | 0 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | bulk find | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/>                                                                                                                                                                                                                          | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <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      | <b>Sh 25</b>     |
|                                                                                                                                               |           | 1610914-100-0823 | 1610915-100-0824 | 1610916-100-0825 |
|                                                                                                                                               |           | 1610917-100-0826 |                  |                  |
| Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D. ND. 16262</b> |           |                  |                  |                  |

## Basic process

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

|            |               |
|------------|---------------|
| Date       | <b>8/2/18</b> |
| Initials   | <b>AKS</b>    |
| Checked by |               |

# ADDITIONAL INFORMATION

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

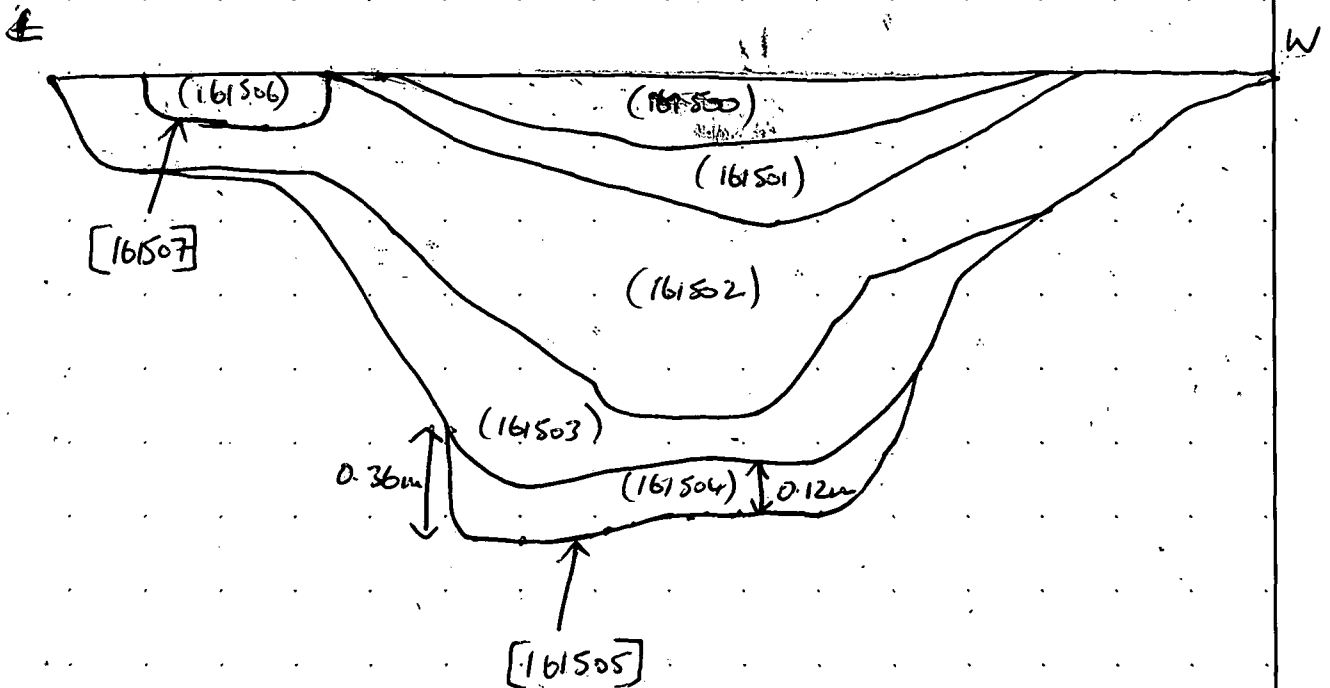
COMPACTED, MOTTLED GREYISH ORANGE SANDY SILTY GRAVEL 0.12m - 0.36m THICK FILL MAY REPRESENT A COMBINATION OF SILTING DUE TO STANDING WATER AND EROSION FROM SIDES OF DITCH

Refer to context [161505]

## SKETCHES

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

### NORTH FACING SECTION.



# MOLA HEADLAND INFRASTRUCTURE



## CONTEXT SHEET

|                                |                           |                                 |                                                                                                                        |
|--------------------------------|---------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 TRA 16</b> | Area/Field<br><b>BNOS</b> | Sub-area/Trench                 | Context number<br><b>161505</b>                                                                                        |
| ECB #                          | Subgroup                  | Parent context<br><b>161505</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                |  |  |                 |
|--|--|----------------|--|--|-----------------|
|  |  | <b>161504</b>  |  |  | Same as context |
|  |  | <b>161505</b>  |  |  | Cuts context    |
|  |  | <b>161003?</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 checked="" type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                                                                                                       | <b>Sides</b><br><input type="checkbox"/> vertical<br><input checked="" type="checkbox"/> steep<br><input type="checkbox"/> moderate<br><input type="checkbox"/> gentle<br><input checked="" type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><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* |                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b><br><b>3.90m E-W</b>                                                                                                                                                                                                                                                                   | <b>Width</b><br><b>2.70m N-S</b>                                                                                                                                                                                                             | <b>Depth</b><br><b>1.20m</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"/> | <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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <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

|            |           |                  |                                                                                                           |
|------------|-----------|------------------|-----------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos        | Drawing nos                                                                                               |
|            |           | 1610914-100-0823 | Surveyed: <b>DH 25</b>                                                                                    |
|            |           | 1610915-100-0824 | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|            |           | 1610916-100-0825 |                                                                                                           |
|            |           | 1610917-100-0826 | D. NO. 16262                                                                                              |

### Basic process

|                                                  |                              |                                 |
|--------------------------------------------------|------------------------------|---------------------------------|
| construction <input checked="" type="checkbox"/> | use <input type="checkbox"/> | disuse <input type="checkbox"/> |
| Date                                             | <b>8/2/18</b>                |                                 |
| Initials                                         | <b>HCB</b>                   |                                 |
| Checked by                                       |                              |                                 |

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

# ADDITIONAL INFORMATION

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

SLOT THROUGH CIRCULAR DITCH. CUT SHARPLY FROM SURFACE WITH STEADY SLOPING STEPPED SIDES. BREAK OF SLOPE TO BASE NOT PERCEPTIBLE. BASE FLAT.

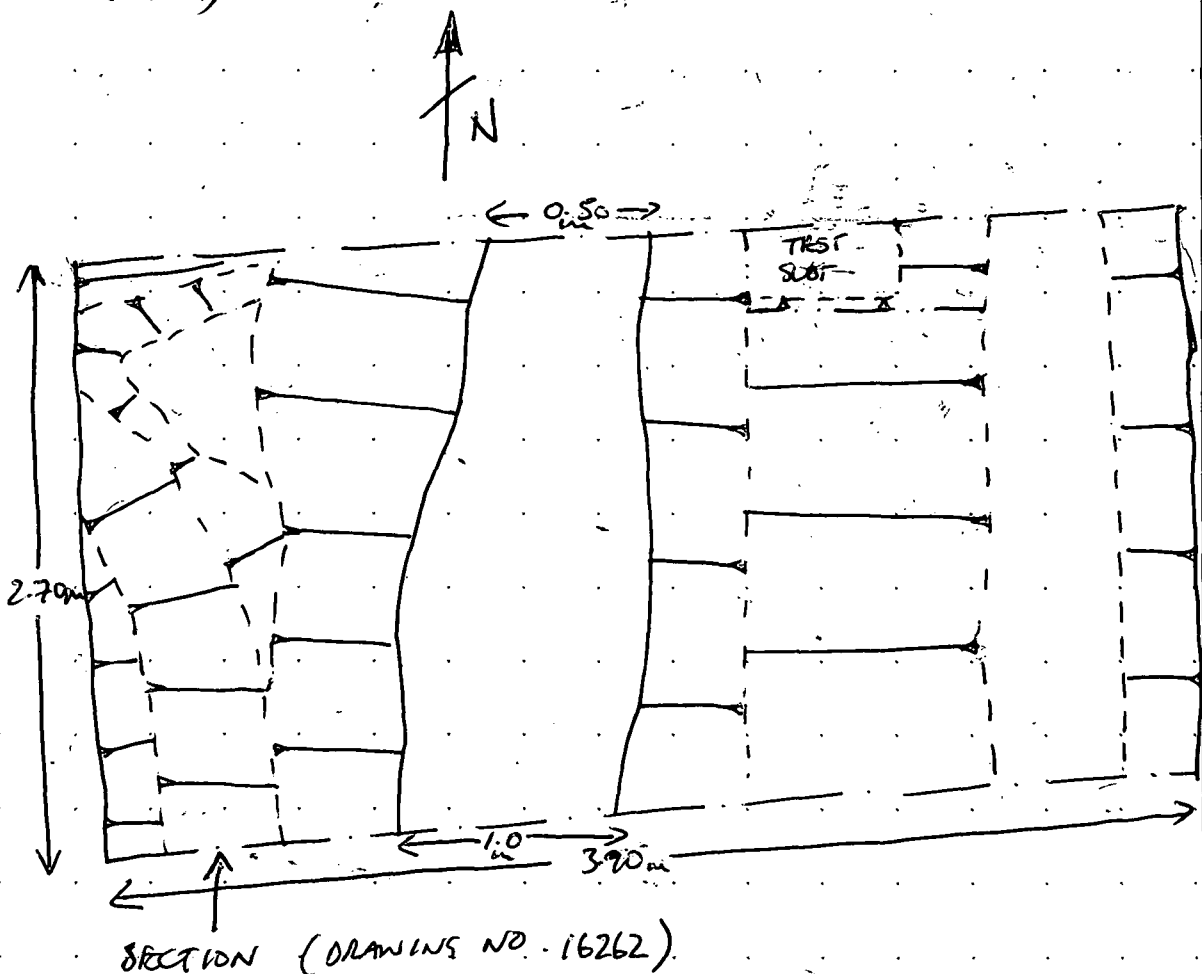
SEE BELOW FOR DIMENSIONS.

POSSIBLE HENSE MONUMENT? OR BARRON ENLARGEMENT?

(161500)(161501)  
Refer to context (161502)(161503)  
(161504).

## SKETCHES

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



## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 160002 |  |  | Same as context |
|  |  | 161506 |  |  | Cuts context    |
|  |  | 161507 |  |  | 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<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)

### DESCRIPTION

## INTERPRETATION

[illegible]

CROSS REFERENCE

| Sample nos. | Findings nos. | Photo nos.       | Drawing nos.                                                                                              | Sh 25 |
|-------------|---------------|------------------|-----------------------------------------------------------------------------------------------------------|-------|
|             |               | 1610914-100-0825 | Surveyed:                                                                                                 |       |
|             |               | 1610915-100-0824 | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |       |
|             |               |                  | D. NO. 16262,                                                                                             |       |

### Basic process

construction ☐ use ☐ disuse ☒

4a

|            |        |
|------------|--------|
| Date       | 9/2/18 |
| Initials   | HCB    |
| Checked by |        |

# ADDITIONAL INFORMATION

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

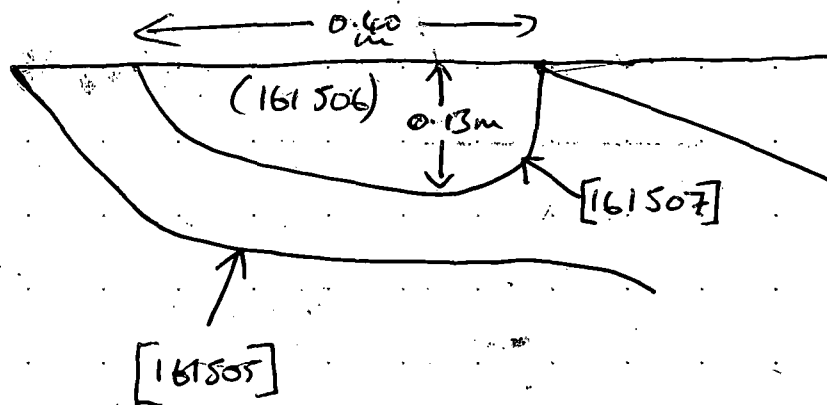
SOFTLY COMPACTED, MID ORANGEY BROWN, SANDY SILT  
WITH AN OCC. SMALL ANGULAR PEBBLE.  
FIN OF A POST HOLE?

Refer to context

[161507]

## SKETCHES

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







|                               |                           |                                 |                                                                                                                        |
|-------------------------------|---------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14 TBA16</b> | Area/Field<br><b>BNOS</b> | Sub-area/french                 | Context number<br><b>161507</b>                                                                                        |
| ECB#                          | Subgroup                  | Parent context<br><b>161507</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |                   |               |  |                 |
|--|--|-------------------|---------------|--|-----------------|
|  |  | <b>161506</b>     |               |  | Same as context |
|  |  | <b>161507</b>     |               |  | Cuts context    |
|  |  | <del>161508</del> | <b>161501</b> |  | Cut by context  |

**CUT**

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

**DESCRIPTION**

**INTERPRETATION**

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                          |                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input checked="" type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                          |                              |                 | pit <input type="checkbox"/><br>post-hole <input checked="" type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input 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>I <input type="checkbox"/> E-W<br>I <input type="checkbox"/> NE-SW<br>I <input type="checkbox"/> NW-SE                                                                                                                                          | <b>Sides</b><br>I <input checked="" 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>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>0.40m E-W</b>                                                                                                                                                                                                                                                                                 | <b>Width</b><br><b>0.14m N-S</b>                                                                                                                                                                                                                         | <b>Depth</b><br><b>0.13m</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"/> | <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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1"> <tr> <td>stones*</td> <td>chalk</td> <td>iron ore</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> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 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 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**CROSS REFERENCE**

|             |            |                                                                                                           |              |
|-------------|------------|-----------------------------------------------------------------------------------------------------------|--------------|
| Sample nos. | Finds nos. | Photo nos.                                                                                                | Drawing nos. |
|             |            | <b>1610914-100-0823</b>                                                                                   | <b>25</b>    |
|             |            | <b>1610915-100-0824</b>                                                                                   |              |
|             |            | Surveyed:                                                                                                 |              |
|             |            | Plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |              |
|             |            | <b>D. NO. 16262</b>                                                                                       |              |

**Basic process**

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>9/2/18</b>                                                                                            |
| Initials <b>WCS</b>                                                                                           |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

PROBABLY CIRCULAR / SUB CIRCULAR CUT ORIGINALLY,  
TRUNCATED BY SECTION ON NORTH SIDE.  
VERTICAL WESTERN EDGE, STEEPLY SLOPING EASTERN  
EDGE, BASE FLAT: 0.40m E-W, 0.14m N-S, 0.13m  
DEEP. POSSIBLE REMAINS OF A POST HOLE. APPEARS  
TO TRUNCATE FILL (161501)

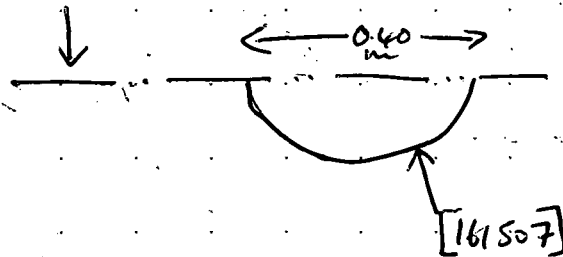
Refer to context

(161506)

## SKETCHES

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

TRUNC BY SECTION



# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A11       | TEAB       |                 | 161508                                                                                                 |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           |            | 161511          | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |        |  |                 |
|--|--|--------|--|-----------------|
|  |  | 161508 |  | Same as context |
|  |  | 161508 |  | Cuts context    |
|  |  | 161516 |  | 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>borrow 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>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 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 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>0.30 m                                                                                                                                                            |                          | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                                                                                                                                |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| frequency                                                                                                                                                                             | stones*                  | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | iron pan                 | manganese                                                                                                                                                                                                                                                                                                                                                                      | charcoal                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## CROSS REFERENCE

|            |           |                                          |                                                                                                                                         |
|------------|-----------|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                | Drawing nos                                                                                                                             |
| /          | /         | 1610926<br>TO<br>1610931 +<br>1610937/38 | 16265<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>8/27 |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date: 12/21/18                                                                                                |
| Initials: C.L. SF                                                                                             |
| Checked by:                                                                                                   |

# ADDITIONAL INFORMATION

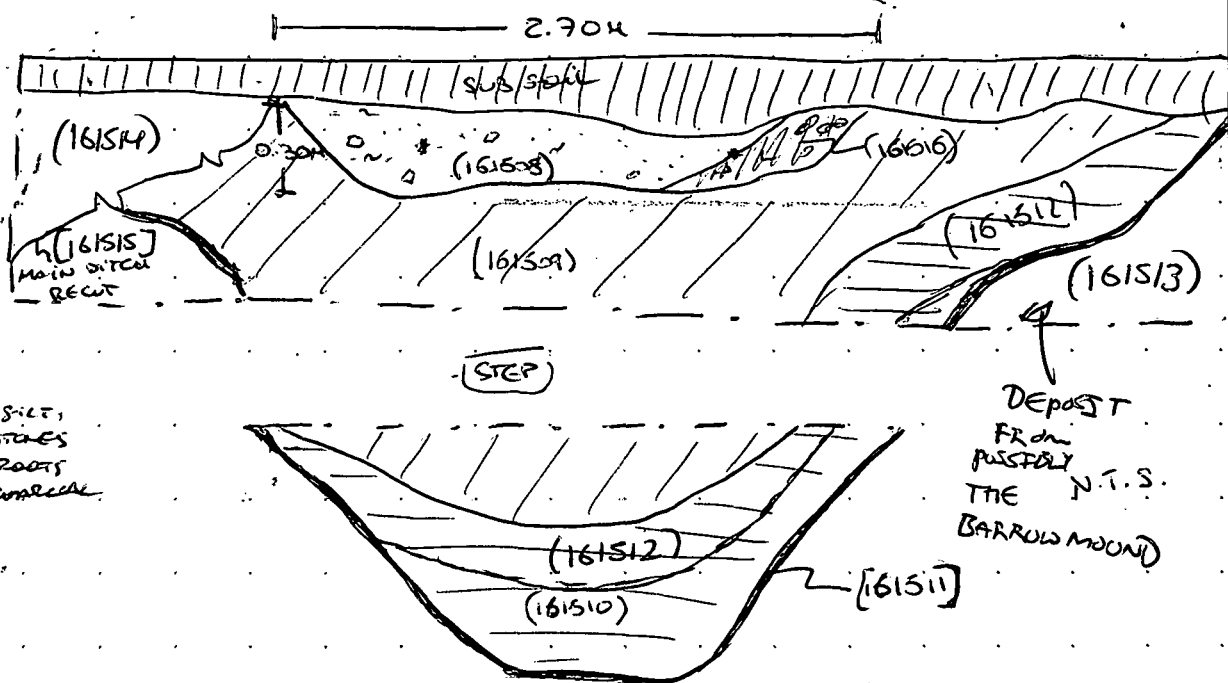
(any further details that may be important for understanding the context, including items marked \* overleaf)

LAST FILL OF INNER DITCH, SIMILAR BUT SLIGHTLY LIGHTER THAN THE SUBSOIL  
 VERY FEW FLECKS OF CHARCOAL AND PLANT REMAINS (SMALL ROOTS)  
 MODERATE PRESENCE OF SMALL ANGULAR AND ROUNDED STONES.  
 ONLY VISIBLE IN SECTION - ~~DO~~ BY MACHINE

Refer to context 161511

## SKETCHES

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



SOUTH EAST FACING SECTION

# MOLA HEADLAND INFRASTRUCTURE



# CONTEXT SHEET

|           |            |                  |                                                                                                        |
|-----------|------------|------------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Feature | Context number                                                                                         |
| A16       | TCA16      |                  | 161509                                                                                                 |
| ECB #     | Subgroup   | Parent context   | Context type                                                                                           |
|           |            | 161511           | cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |        |        |  |                 |
|--|--|--------|--------|--|-----------------|
|  |  | 161508 |        |  | Same as context |
|  |  | 161509 |        |  | Cuts context    |
|  |  | 161510 | 161512 |  | 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 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 type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input checked="" 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"/> |  | 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>0.60m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| stones* <input type="checkbox"/><br>chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/><br>manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/><br>plant remains* <input type="checkbox"/><br>wood <input type="checkbox"/><br>marine shell <input type="checkbox"/><br>bone* <input type="checkbox"/><br>pot <input type="checkbox"/><br>fired clay / CBM <input type="checkbox"/><br>CTP <input type="checkbox"/><br>mortar/plaster <input type="checkbox"/><br>leather/textile <input type="checkbox"/><br>glass <input type="checkbox"/><br>metal <input type="checkbox"/><br>industrial waste <input type="checkbox"/><br>lithics <input type="checkbox"/><br>coarse stone <input type="checkbox"/> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency <input type="checkbox"/><br>bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |                                        |                                                                                                                                              |
|------------|-----------|----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                              | Drawing nos                                                                                                                                  |
|            |           | 1610926<br>TO<br>1610931<br>1610933-38 | D16265-8112<br>Surveyed: D16268<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date 12/2/18                                                                                                  |
| Initials GL SF                                                                                                |
| Checked by                                                                                                    |

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

# ADDITIONAL INFORMATION

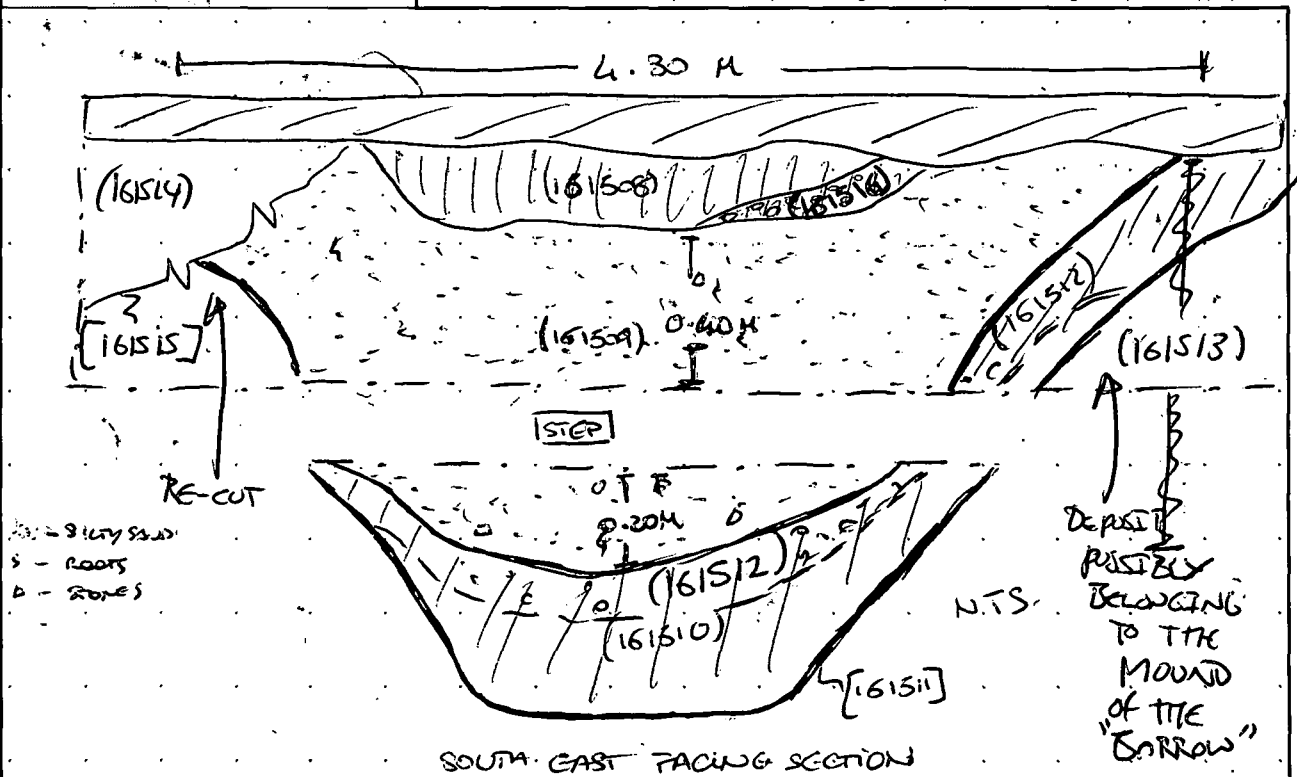
(any further details that may be important for understanding the context, including items marked \* overleaf)

~~Fill~~ FILL OF INNER DITCH, SIMILAR BUT SLIGHTLY <sup>LIGHTER</sup> ~~THAN~~ THAN THE SUBSOIL. FEW ~~SMALL SIZED~~ <sup>SMALL</sup> SIZED ANGULAR STONES AND VERY OCCASIONAL PLANT REMAINS SUCH AS SMALL ROOTS.

Refer to context 161511

## SKETCHES

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







|                         |                             |                                 |                                                                                                                        |
|-------------------------|-----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench<br><b>N</b>     | Context number<br><b>161510</b>                                                                                        |
| ECB-1                   | Subgroup                    | Parent context<br><b>161511</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |                   |               |  |                 |
|--|--|-------------------|---------------|--|-----------------|
|  |  | <del>161509</del> | <b>161512</b> |  | Same as context |
|  |  | <b>161510</b>     |               |  | Cuts context    |
|  |  | <b>161511</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>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>L <input type="checkbox"/> flat<br>L <input type="checkbox"/> concave<br>L <input type="checkbox"/> v-shaped<br>L <input type="checkbox"/> sloping<br>L <input type="checkbox"/> uneven<br>L <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 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 checked="" type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input checked="" 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 (max)</b><br><b>1.25m</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| stones* <input type="checkbox"/><br>chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/><br>manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/><br>plant remains* <input type="checkbox"/><br>wood <input type="checkbox"/><br>marine shell <input type="checkbox"/><br>bone* <input type="checkbox"/><br>pot <input type="checkbox"/><br>fired clay / CBM <input type="checkbox"/><br>CTP <input type="checkbox"/><br>mortar/plaster <input type="checkbox"/><br>leather/textile <input type="checkbox"/><br>glass <input type="checkbox"/><br>metal <input type="checkbox"/><br>industrial waste <input type="checkbox"/><br>lithics <input type="checkbox"/><br>coarse stone <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency <b>F</b><br>bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>0</b> <b>0</b> <b>0</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

**CROSS REFERENCE**

|                             |                       |                                                     |                                                                                                                                                                        |
|-----------------------------|-----------------------|-----------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>316231</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610926 to 1610931 + 1610937/38</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16265 + D16268 + J#27</b> |
|-----------------------------|-----------------------|-----------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Basic process**

construction ☐ use ☐ disuse ☒

|            |                 |
|------------|-----------------|
| Date       | <b>13/02/18</b> |
| Initials   | <b>SF GL</b>    |
| Checked by |                 |



# ADDITIONAL INFORMATION

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

PRIMARY FILL OF DITCH - CONSISTS MOSTLY OF GRAVEL WITH V. OCC. CHARCOAL, MAGNETITE + IRON PANNING WHICH SUGGESTS THE PRESENCE OF WATER AT SOME POINT.

NO DATEABLE FINDS - BUT FILL WAS SAMPLED 16231..

POSSIBLE NATURAL SLOMP OF GRAVEL FROM MAYBE A BANK ON THE NORTH SIDE?

Refer to context (161511) FOR (161503) FOR

PLAN + SECTION

(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>TEA16</b> | Sub-area/Trench<br><b>1.1.1</b> | Context number<br><b>161511</b>                                                                                        |
| ECB#                    | Subgroup                   | Parent context<br><b>161511</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |             |  |                              |
|--|--|---------------|-------------|--|------------------------------|
|  |  | <b>161510</b> |             |  | Same as context              |
|  |  | <b>161511</b> |             |  | Cuts context <b>(161513)</b> |
|  |  | <b>161513</b> | <b>Area</b> |  | Cut by context               |

## CUT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                          |                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                          |                           |  | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input 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>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>I <input type="checkbox"/> vertical<br>I <input type="checkbox"/> steep<br>I <input checked="" 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 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                                                                                                                                                                                                                                                                          | Length (SLT ONLY) <b>2m</b>                                                                                                                                                                                                                                                                                      | Width (APX.) <b>4.80m</b>                                                                                                                                                                                                                                | Depth (APX.) <b>1.25m</b> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| 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"/>                                              |                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                          |                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

## 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 type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |           |          |               |           |              |               |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Thickness</b><br>black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |               |           |              |               |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |               |           |              |               |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1"> <tr> <td>trones*</td> <td>chalk</td> <td>iron pan</td> <td>manganese</td> <td>charcoal</td> <td>plant remains</td> <td>wood</td> <td>marine shell</td> <td>bone*</td> <td>pot</td> <td>fired clay / CBM</td> <td>CTP</td> <td>mortar/plaster</td> <td>leather/textile</td> <td>glass</td> <td>metal</td> <td>industrial waste</td> <td>lithics</td> <td>coarse stone</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | trones*   | 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 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| trones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | iron pan                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | manganese | charcoal | plant remains | wood      | marine shell | bone*         | pot  | fired clay / CBM | CTP   | mortar/plaster | leather/textile  | glass | metal          | industrial waste | lithics | coarse stone |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |           |          |               |           |              |               |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| frequency<br>bulk find <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <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>1610926 TO 1610931 + 1610937/38</b> | Drawing nos<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16265 + D16268 + SH27</b> |
|------------------------|-----------------------|-----------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

construction ☒ use ☐ disuse ☐

Date **13/02/18**

Initials **SF GL**

Checked by

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

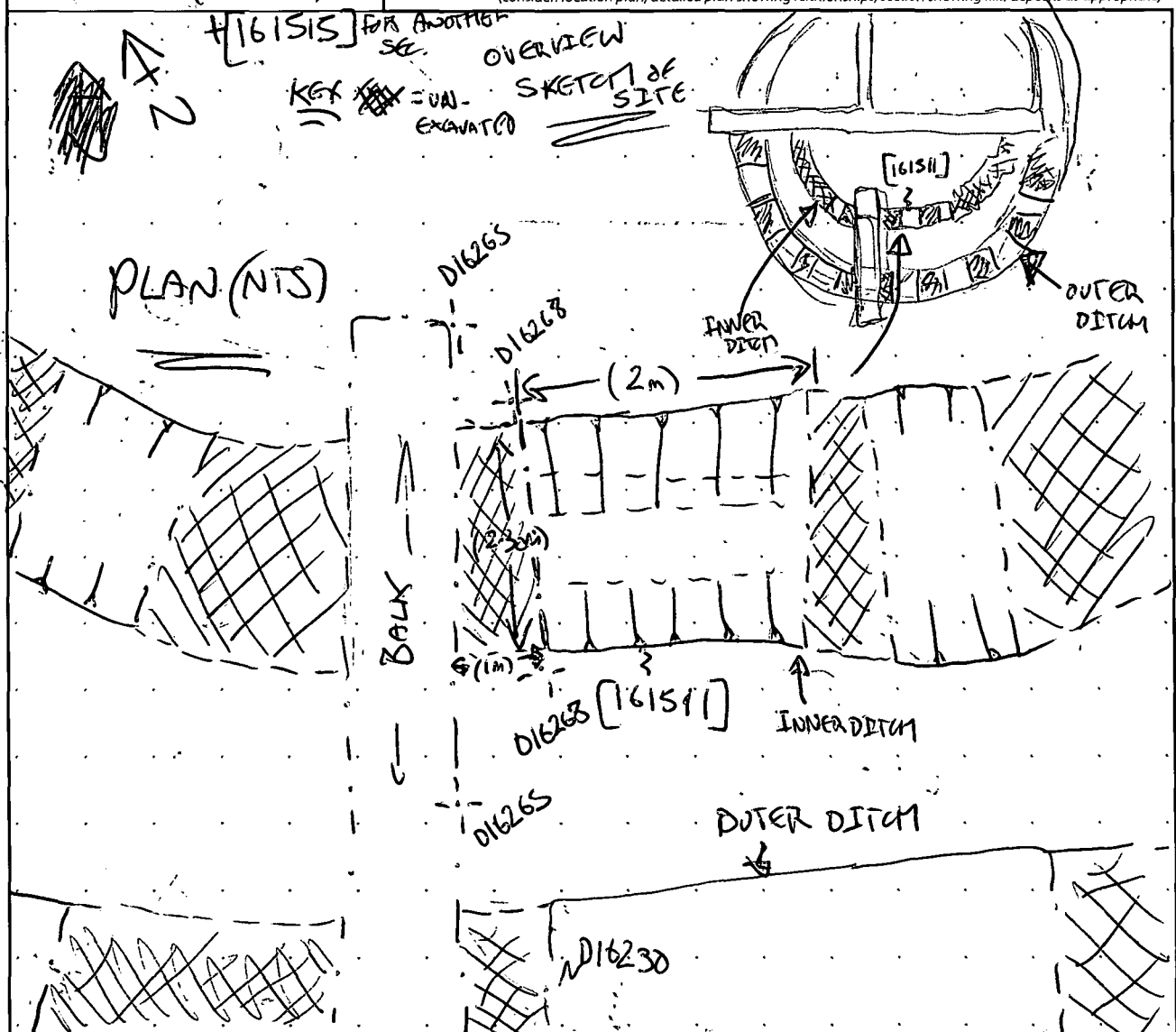
SEEMS TO TRUNCATE THE POSSIBLE BARROW MOUND  
TO THE NORTH END OF THE SECTION.

NO DATEABLE FINDS WERE RECOVERED FROM THIS FEATURE  
IN THIS SLOT.

Refer to context (161508) (FOR SECTION)

## SKETCHES

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



## STRATIGRAPHY

|  |  |        |  |  |                 |
|--|--|--------|--|--|-----------------|
|  |  | 161509 |  |  | Same as context |
|  |  | 161512 |  |  | Cuts context    |
|  |  | 161510 |  |  | Cut by context  |

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

## 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 |  <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* |                 |
|  N                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |
| <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"/>                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |

(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 checked="" type="checkbox"/> moderately compact            |                          | brownish <input type="checkbox"/>                                                             | <input checked="" type="checkbox"/> brown |                                 |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    |                          | greyish <input checked="" type="checkbox"/>                                                   | <input type="checkbox"/> grey             |                                 |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> friable                                  |                          | orangeish <input type="checkbox"/>                                                            | <input type="checkbox"/> orange           |                                 |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                          | 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 (Apx)</b>                                            |                          |                                                                                               |                                           |                                 |                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0-79                                                              |                          | 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                                                         | F                        |                                                                                               |                                           |                                 | 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 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"/> |
|            |           | (1610926       | Surveyed:                                                                                                 | Date 13/02/18                                                                                                 |
|            |           | 1610931)       | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> | Initials SF GL                                                                                                |
|            |           | +<br>(1610937# | 016265                                                                                                    | Checked by                                                                                                    |
|            |           | 1610938)       | D 16268 + 8# 27                                                                                           |                                                                                                               |

# ADDITIONAL INFORMATION

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

SECONDARY FILL OF DITCH

CONSISTED OF MOSTLY GRAVEL + V. OLL. CHARCOAL.

NO FINDS FOUND.

POSSIBLE NATURAL SLUMP OF GRAVEL FROM  
MAYBE A BANK ON THE NORTH?

Refer to context

[161511] FOR  
[161508] FOR

PLAN  
SEC.

(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<br><b>161513</b>                                                                                        |
| ECB#      | Subgroup   | Parent context  | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input checked="" type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |               |  |  |                 |                      |
|--|--|---------------|--|--|-----------------|----------------------|
|  |  | <b>161511</b> |  |  | Same as context | OTHER MOUND CONTEXTS |
|  |  | <b>161513</b> |  |  | Cuts context    |                      |
|  |  | <b>NAT?</b>   |  |  | Cut by context  | <b>161511</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 checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Colour</b><br>light <input checked="" type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown<br>greyish <input type="checkbox"/> grey<br>orangeish <input type="checkbox"/> orange<br>yellowish <input checked="" type="checkbox"/> yellow<br>reddish <input type="checkbox"/> red<br>blueish <input type="checkbox"/> blue | <b>Composition</b><br>clayey <input type="checkbox"/> clay<br>silty <input checked="" type="checkbox"/> silt<br>sandy <input type="checkbox"/> sand<br>gravelly <input checked="" type="checkbox"/> gravel<br>peaty <input type="checkbox"/> peat | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input 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 checked="" type="checkbox"/> |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|----------------|-----------|--------------|----------------|------|------------------|-------|----------------|------------------|-------|----------------|------------------|---------|--------------|------------------|---------|--------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <b>Thickness</b><br>0.60 m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                               | other* <input type="checkbox"/>                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1"> <tr> <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></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | stones*   | chalk    | iron pan       | manganese | charcoal     | plant remains* | wood | marine shell     | bone* | pot            | fired clay / CBM | CTP   | mortar/plaster | leather/textile  | glass   | metal        | industrial waste | lithics | coarse stone |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | chalk                                                                                                                                                                                                                                                                                                                                                                                                                                       | iron pan                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | manganese | charcoal | plant remains* | wood      | marine shell | bone*          | pot  | fired clay / CBM | CTP   | mortar/plaster | leather/textile  | glass | metal          | industrial waste | lithics | coarse stone |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>frequency</b><br>H / / / / / / / / / / / / / / / / / / / /                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>bulk find</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |          |                |           |              |                |      |                  |       |                |                  |       |                |                  |         |              |                  |         |              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

## CROSS REFERENCE

|            |           |                                          |                                                                                                                                           |
|------------|-----------|------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                | Drawing nos                                                                                                                               |
|            |           | 1610826<br>TO<br>1610931 +<br>1610937/38 | D16265<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>JH 27 |

## Basic process

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

Date **13/2/18**

Initials **AL SF**

Checked by

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

# ADDITIONAL INFORMATION

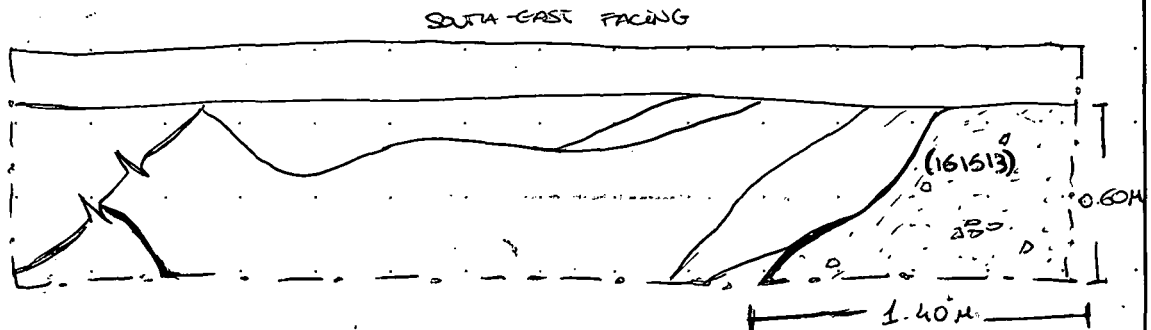
(any further details that may be important for understanding the context, including items marked \* overleaf)

THIS DEPOSIT IS POSSIBLY BELONGING TO THE MOUND OF THE BARROW,  
ONLY VISIBLE IN SECTION, MOST OF IT HAS BEEN DUG BY MACHINE.  
IT'S GRADUALLY RISING TOWARDS THE MIDDLE AREA OF THE BARROW.  
IT'S MOSTLY COMPOSED OF SILTY SAND WITH LENSES OF GRAVEL.

Refer to context 161508

## SKETCHES

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



NTS





|                         |                             |                                 |                                                                                                                        |
|-------------------------|-----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench                 | Context number<br><b>161514</b>                                                                                        |
| ECB #                   | Subgroup                    | Parent context<br><b>161515</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |                   |  |                                                     |                                                                 |
|--|--|-------------------|--|-----------------------------------------------------|-----------------------------------------------------------------|
|  |  | <b>Sub-161514</b> |  | Same as context <input checked="" type="checkbox"/> | Other <input checked="" type="checkbox"/> <b>RE-CUT CONTEXT</b> |
|  |  | <b>161514</b>     |  | Cuts context <input type="checkbox"/>               |                                                                 |
|  |  | <b>161515</b>     |  | Cut by context <input 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><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"/>                                       |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                                                                       |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

**FILL/DEPOSIT**

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

**DESCRIPTION**

**INTERPRETATION**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input 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 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>0.61m</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"/> 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 <b>M</b><br>bulk find <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

**CROSS REFERENCE**

|            |           |                                                                                               |                                                                                                                                                                                 |
|------------|-----------|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos<br><b>(1610926)</b><br><b>(1610931) +</b><br><b>(1610937) +</b><br><b>(1610938)</b> | Drawing nos<br><b>SH 27</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D16265 + D16268</b> |
|------------|-----------|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Basic process**

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>13/02/18</b>                                                                                          |
| Initials <b>SE GL</b>                                                                                         |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

FILL & RE-CUT OF OUTER-DITCH

NO FINDS ONLY SMALL OCC.

FIRE CLAY SEEN IN SECTION  
BITS

Refer to context

16156 FOR PLAN  
161515 FOR SEC.

## SKETCHES

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



|                         |                             |                                 |                                                                                                                        |
|-------------------------|-----------------------------|---------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA 16</b> | Sub-area/Trench                 | Context number<br><b>161515</b>                                                                                        |
| ECB#                    | Subgroup                    | Parent context<br><b>161515</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

**STRATIGRAPHIC MATRIX**

**STRATIGRAPHY**

|  |  |               |  |  |                                                                                    |
|--|--|---------------|--|--|------------------------------------------------------------------------------------|
|  |  | <b>161514</b> |  |  | Same as context <input checked="" type="checkbox"/> <b>OTHER RE-CUT CONTEXT IS</b> |
|  |  | <b>161515</b> |  |  | Cuts context <b>[161511]</b>                                                       |
|  |  | <b>161508</b> |  |  | Cut by context <input checked="" type="checkbox"/>                                 |

**CUT**

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

**DESCRIPTION**

**INTERPRETATION**

|                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                               |                                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input checked="" type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                               |                                 |  | 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 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>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>1 <input type="checkbox"/> vertical<br>1 <input type="checkbox"/> steep<br>1 <input checked="" type="checkbox"/> moderate } sloping<br>1 <input type="checkbox"/> gentle<br>1 <input type="checkbox"/> stepped<br>1 <input type="checkbox"/> undercutting<br>1 <input type="checkbox"/> complex* | <b>Base</b><br>1 <input type="checkbox"/> flat<br>1 <input 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* | NOT VISIBLE IN SECTION<br>N/A   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | Length <b>N/A</b>                                                                                                                                                                                                                                                                                                | Width (in section) <b>1.60m</b>                                                                                                                                                                                                               | Depth (in section) <b>0.61m</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"/>                                       |                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                               |                                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| RE-CUT                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                               |                                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |

**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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |          |                |          |              |          |                |                  |              |                |                 |                  |       |                  |                 |              |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <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></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 | frequency |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | bulk find |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |          |                |          |              |          |                |                  |              |                |                 |                  |       |                  |                 |              |       |                  |         |              |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**CROSS REFERENCE**

|            |           |                     |                                                                                                                                           |
|------------|-----------|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos           | Drawing nos                                                                                                                               |
|            |           | (1610926)           | Dr 27                                                                                                                                     |
|            |           | (1610931)           |                                                                                                                                           |
|            |           | (1610937 + 1610938) |                                                                                                                                           |
|            |           |                     | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D16265 + D16268 |

|                                                  |                                                              |
|--------------------------------------------------|--------------------------------------------------------------|
| <b>Basic process</b>                             |                                                              |
| construction <input checked="" type="checkbox"/> | use <input type="checkbox"/> disuse <input type="checkbox"/> |
| Date                                             | 13/02/18                                                     |
| Initials                                         | SF GL                                                        |
| Checked by                                       |                                                              |

# ADDITIONAL INFORMATION

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

RE CUT OF OUTER-DITCH THAT ALSO APPEARS TO TRUNCATE THE INNER-DITCH ALSO!

NO DATEABLE FINDS

UN-CERTAIN EDGE OF NORTH SIDE.

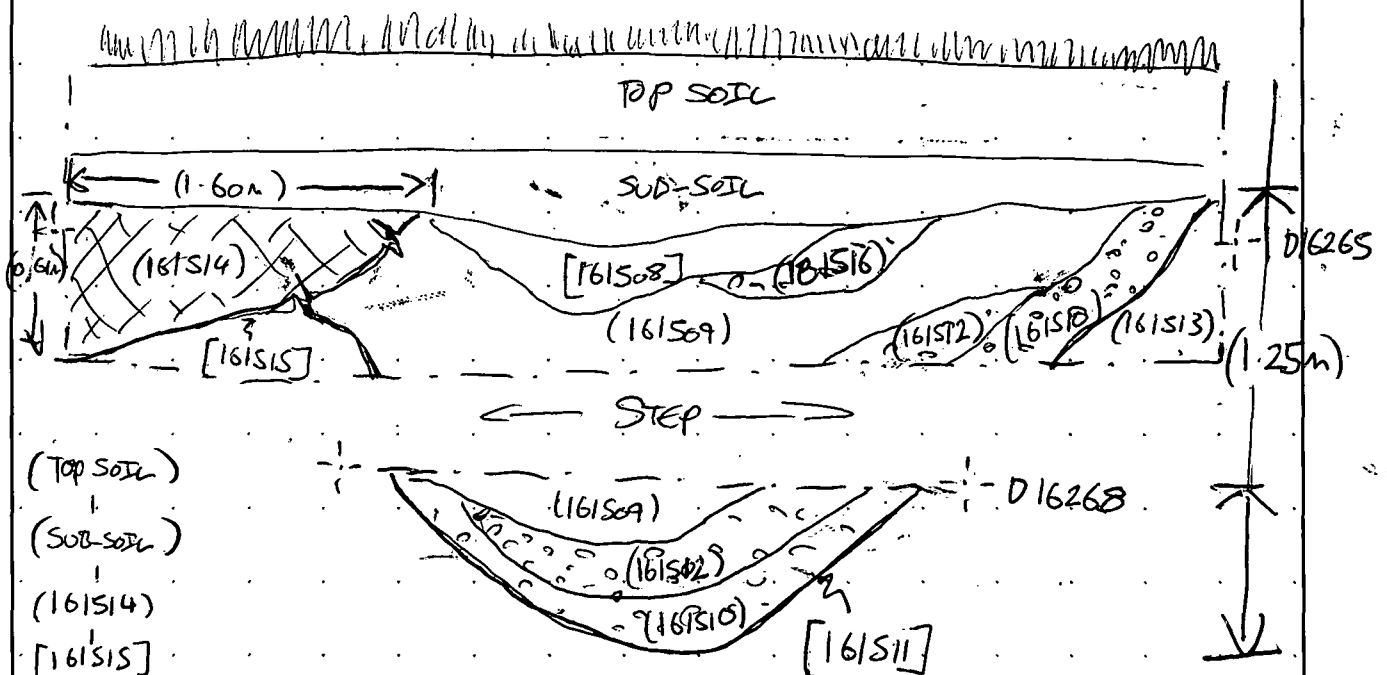
BASE NOT SEEN IN SECTION!

Refer to context [161511] FOR PLAN

## SKETCHES

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

### SECTION SW FACING



(TOP SOIL)

(SUB-SOIL)

(161514)

[161515]

(161508)

(161516)

(161509)

(161512)

(161510)

[161511]

(161513)

(NAT.)

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | 161508   |  |  | Same as context |
|  |  | (161516) |  |  | Cuts context    |
|  |  | 161509   |  |  | Cut by context  |

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

## INTERPRETATION

|                                                                                                                                                                                                                                                                                              |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                      |                                                                                                                                                                                                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                      |                                                                                                                                                                                                                                   |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                    |                                       | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div style="font-size: 2em; margin-right: 10px;">}</div> <div>sloping</div> </div> |                                      | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b><br><input type="text"/> | <b>Width</b><br><input type="text"/>                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>Depth</b><br><input type="text"/> | <b>Diameter</b><br><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"/>                                      |                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                      |                                                                                                                                                                                                                                   |

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

## INTERPRETATION

[illegible]

### Basic process

|            |           |                                       |                                                                                                                                 |                                                                                                    |
|------------|-----------|---------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                             | Drawing nos                                                                                                                     | <input type="checkbox"/> construction <input type="checkbox"/> use <input type="checkbox"/> disuse |
| ✓          | ✓         | 1610926 TO<br>1610931 +<br>1610937/38 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>JH 27 | Date 13/2/18<br>Initials AL SF<br>Checked by                                                       |

# ADDITIONAL INFORMATION

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

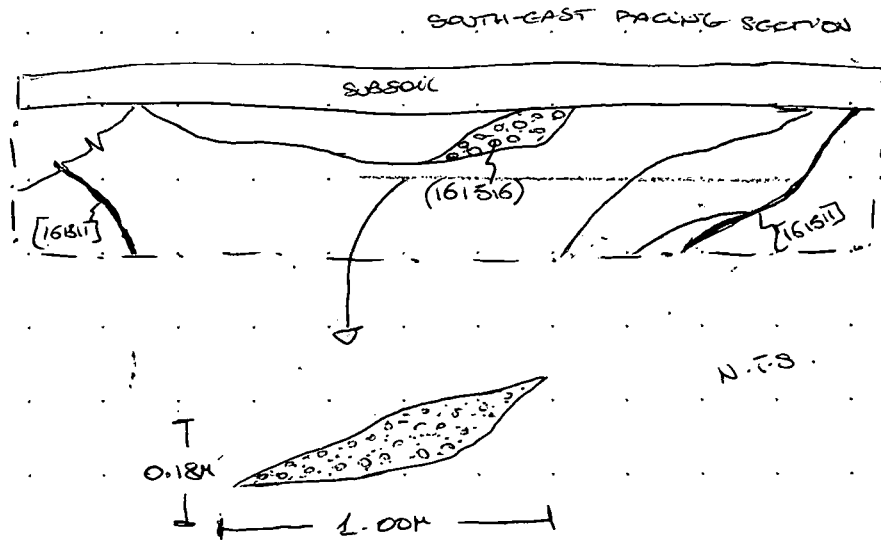
GRAVELLY FILL OF INNER DITCH GENTLY SLOPING TOWARDS THE CENTER  
MANY SMALL SIZED ANGULAR AND ROUNDED STONES AND FEW SMALL  
ROOTS.

NO FINDS - ~~NOTED~~, ONLY VISIBLE IN SECTION; DUG BY MACHINE

Refer to context 161508

## 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>TEX16</b> | Sub-area/Trench                   | Context number<br><b>[161517]</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>[161517]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161518)</b> |  |  | Same as context |
|  |  | <b>[161517]</b> |  |  | Cuts context    |
|  |  | <b>(161003)</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 checked="" type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |
| <b>Orientation</b><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input 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 checked="" type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                              |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres -                                                                                                                                                                                                                                                                        | <b>Length</b><br><b>3.30m</b>                                                                                                                                                                                                                                                                    | <b>Width</b><br><b>2.09m</b>                                                                                                                                                                                                                 | <b>Depth</b><br><b>0.70m</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"/> | 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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| stones* <input type="checkbox"/><br>chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/><br>manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/><br>plant remains* <input type="checkbox"/><br>wood <input type="checkbox"/><br>marine shell <input type="checkbox"/><br>bone* <input type="checkbox"/><br>pot <input type="checkbox"/><br>fired clay / CBM <input type="checkbox"/><br>CTP <input type="checkbox"/><br>mortar/plaster <input type="checkbox"/><br>leather/textile <input type="checkbox"/><br>glass <input type="checkbox"/><br>metal <input type="checkbox"/><br>industrial waste <input type="checkbox"/><br>lithics <input type="checkbox"/><br>coarse stone <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>frequency</b><br>bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

## CROSS REFERENCE

|             |           |            |                                                                                                                                                                |
|-------------|-----------|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos. | Find nos. | Photo nos. | Drawing nos.                                                                                                                                                   |
|             |           | 1610942    | 8/12/9                                                                                                                                                         |
|             |           | 1610943    |                                                                                                                                                                |
|             |           | 1610945    |                                                                                                                                                                |
|             |           | 1610946    |                                                                                                                                                                |
|             |           |            | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D. 1610947 16283<br>D. 1610948 16284 |

## Basic process

|                                                  |                              |                                 |
|--------------------------------------------------|------------------------------|---------------------------------|
| construction <input checked="" type="checkbox"/> | use <input type="checkbox"/> | disuse <input type="checkbox"/> |
| Date                                             | 14.2.18                      |                                 |
| Initials                                         | GI/MG                        |                                 |
| Checked by                                       |                              |                                 |

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



# ADDITIONAL INFORMATION

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

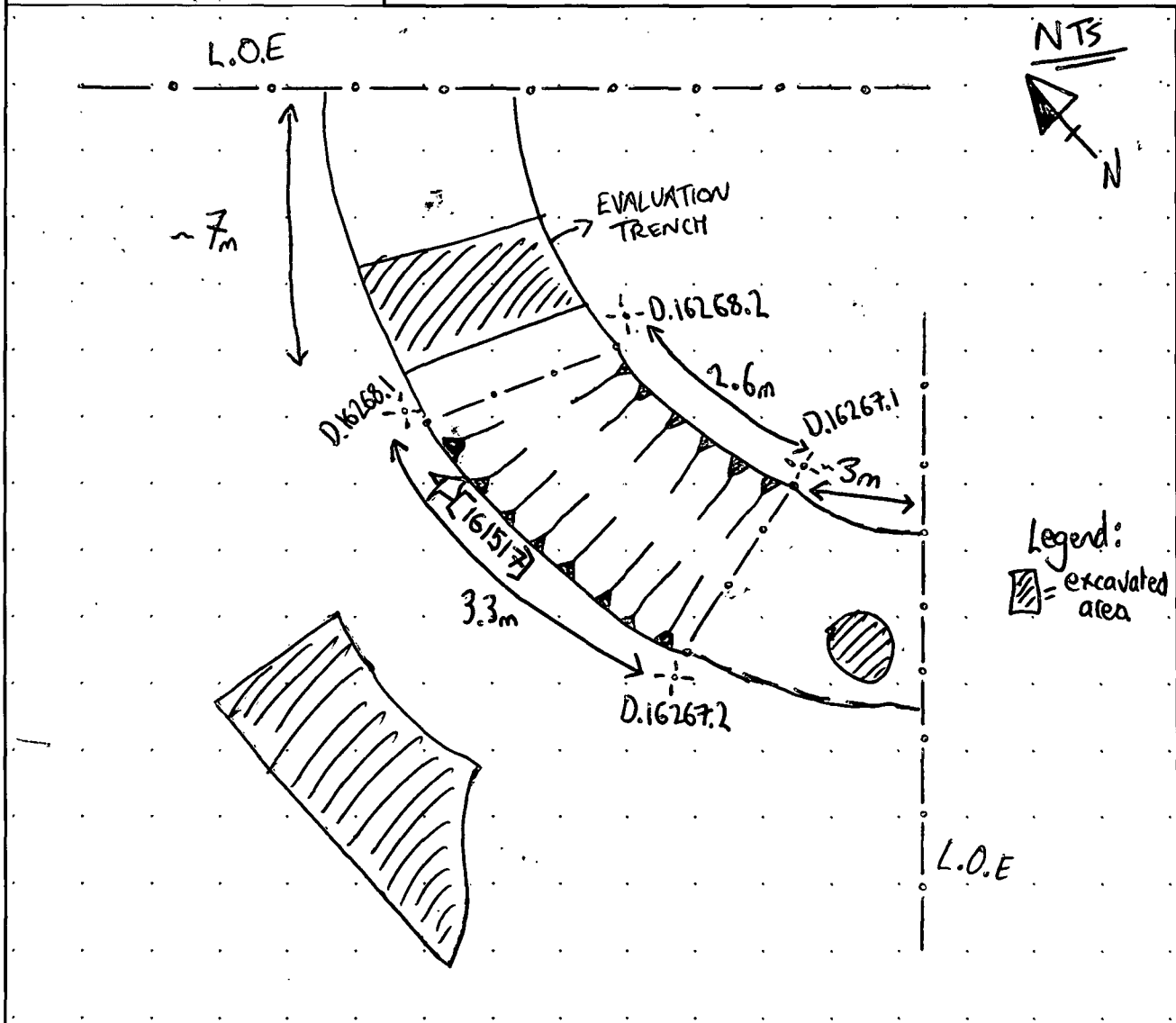
A cut of a feature, probably the inner ditch that may be related to the wider outer ditch.

Possible a find from the top fill (161520) - FLINT

Refer to context (161518)

## 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>TEA16</b> | Sub-area/Trench                   | Context number<br><b>(161518)</b>                                                                                      |
| ECB#                    | Subgroup                   | Parent context<br><b>[161517]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161519)</b> |  |  | Same as context |
|  |  | <b>(161518)</b> |  |  | Cuts context    |
|  |  | <b>[161517]</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 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 checked="" 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"/>                                       |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| (if you are using this section score out section <b>CUT</b> above)                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

## 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 checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown<br>greyish <input type="checkbox"/> <input type="checkbox"/> grey<br>orangeish <input checked="" type="checkbox"/> <input type="checkbox"/> orange<br>yellowish <input type="checkbox"/> <input type="checkbox"/> yellow<br>reddish <input type="checkbox"/> <input type="checkbox"/> red<br>blueish <input type="checkbox"/> <input type="checkbox"/> blue | <b>Composition</b><br>clayey <input type="checkbox"/> <input type="checkbox"/> clay<br>silty <input type="checkbox"/> <input type="checkbox"/> silt<br>sandy <input checked="" type="checkbox"/> <input type="checkbox"/> sand<br>gravelly <input type="checkbox"/> <input checked="" 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>0.10m</b>                                                                                                                                                                                                                                                                                                           | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent<br>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>F</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"/>                                                                     |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| (if you are using this section score out section <b>CUT</b> above)                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |                                          |                                                                                                                                                              |
|------------|-----------|------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                | Drawing nos                                                                                                                                                  |
|            |           | 1610942<br>1610943<br>1610945<br>1610946 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D.16267 - SH 29<br>D.16268 - SH 27 |

## Basic process

construction ☐ use ☐ disuse ☒

Date **14.2.18**

Initials **GI/MG**

Checked by

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

# ADDITIONAL INFORMATION

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

• Primary fill of ditches.

Refer to context [161517]

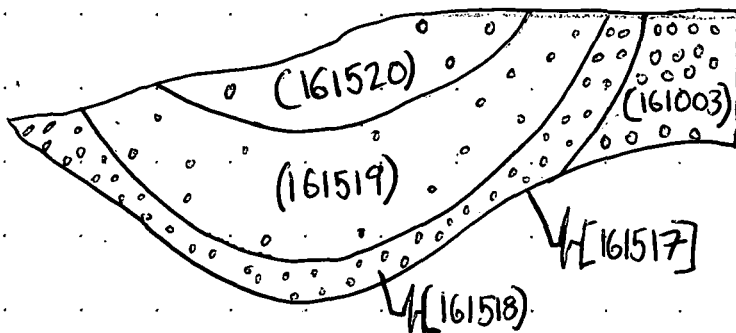
## SKETCHES

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

D.16267.1

NORTH FACING

D.16267.2



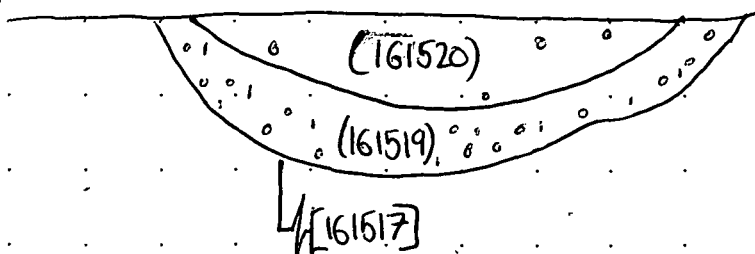
MATRIX  
(161002)  
(161520)  
(161519)  
(161518)  
[161517]  
(161003)

LEGEND  
O = Stone  
I = manganese

D.16268.1

SOUTH-WEST FACING

D.16268.2



MATRIX  
(161002)  
(161520)  
(161519)  
[161517]  
(161003)

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161520) |  |  | Same as context |
|  |  | (161519) |  |  | Cuts context    |
|  |  | (161518) |  |  | Cut by context  |

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

# INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                              |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------|
| <b>Shape</b><br>sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                 |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                 |
| <b>Orientation</b><br> <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br> <input type="checkbox"/> NE-SW<br> <input type="checkbox"/> NW-SE |               | <b>Sides</b><br> <input type="checkbox"/> vertical<br> <input type="checkbox"/> steep<br> <input type="checkbox"/> moderate<br> <input type="checkbox"/> gentle<br> <input type="checkbox"/> stepped<br> <input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |              |                 |
|                                                                                                                                                                                                                                                                                                                                                                                                              |               | <b>Base</b><br> <input type="checkbox"/> flat<br> <input type="checkbox"/> concave<br> <input type="checkbox"/> v-shaped<br> <input type="checkbox"/> sloping<br> <input type="checkbox"/> uneven<br><input type="checkbox"/> complex*                                                                                                                               |              |                 |
| <b>Dimensions</b>                                                                                                                                                                                                                                                                                                                                                                                            | <b>Length</b> | <b>Width</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>Depth</b> | <b>Diameter</b> |
| 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"/>                                                                                                                                                      |               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |              |                 |

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

# INTERPRETATION

| Compaction                                                        |                                             | Colour                                                                                                                                |                          | Composition                                                                  |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|---------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------|------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input checked="" type="checkbox"/> compact                       | <input type="checkbox"/> moderately compact | light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/> |                          | clayey <input type="checkbox"/> <input type="checkbox"/> clay                |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    | <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 checked="" type="checkbox"/> <input type="checkbox"/> orange                                                         |                          | gravelly <input type="checkbox"/> <input checked="" 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                                                         |                                             |                                                                                                                                       |                          |                                                                              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.36m                                                             |                                             | 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                                                         | F                                           |                                                                                                                                       |                          | M                                                                            |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| bulk find                                                         | <input type="checkbox"/>                    | <input type="checkbox"/>                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/>                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <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)

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"/> |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
|  |  | 1610942<br>1610943<br>1610945<br>1610946 | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/><br>D.16267 - 29<br>D.16268 - 27 | Date 14.2.18<br>Initials GI/MG<br>Checked by                                                                  |

# ADDITIONAL INFORMATION

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

• Secondary fill of ditch

Refer to context

(161518) +  
(161517)

## 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>TEA16</b> | Sub-area/Trench                   | Context number<br><b>(161520)</b>                                                                                      |
| ECB#                    | Subgroup                   | Parent context<br><b>[161517]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161002)</b> |  |  | Same as context |
|  |  | <b>(161520)</b> |  |  | Cuts context    |
|  |  | <b>(161519)</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 sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                         | <b>Width</b>                                                                                                                                                                                                                      | <b>Depth</b> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input 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 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>0.24m</b>                                                                                                                                                      | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency <b>M</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                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency <b>M</b>                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |                                          |                                                                                                                                               |
|------------|-----------|------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos                                | Drawing nos                                                                                                                                   |
|            |           | 1610942<br>1610943<br>1610945<br>1610946 | Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/><br>D.16267 s# 29<br>D.16268 s# 27 |

## Basic process

construction ☐ use ☐ disuse ☒

Date **14.2.18**

Initials **GI/MG**

Checked by

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)

- One possible find - a flint core

Refer to context  $\begin{pmatrix} 61518 \\ 61517 \end{pmatrix} +$

(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 16</b> | Sub-area/trench<br><b>—</b>       | Context number<br><b>[161521]</b>                                                                                      |
| ECB#<br><b>—</b>        | Subgroup<br><b>[161521]</b> | Parent context<br><b>[161300]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |                 |
|--|--|-----------------|--|--|-----------------|-----------------|
|  |  | <b>(161538)</b> |  |  | Same as context | <b>—</b>        |
|  |  | <b>[161521]</b> |  |  | Cuts context    | <b>[161003]</b> |
|  |  | <b>[161003]</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 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>I <input type="checkbox"/> E-W<br>✓ <input checked="" type="checkbox"/> NE-SW<br>✓ <input checked="" 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 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 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>3.50m</b>                                                                                                                                                                                                                                                                                  | <b>Width</b><br><b>4.50m</b>                                                                                                                                                                                                                             | <b>Depth</b><br><b>0.82m</b> | <b>Diameter</b><br><b>—</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| <b>Shape result of</b> (tick all that apply)<br>design <input checked="" type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                          |                              |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |  |
| <b>Thickness</b><br><b>—</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<br><b>1610947 - 1610960</b>                                                                                                                  | Drawing nos<br><b>84 30</b> |
|            |           | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>16285</b><br><b>16286</b> |                             |

## Basic process

|                                                  |                              |                                 |
|--------------------------------------------------|------------------------------|---------------------------------|
| construction <input checked="" type="checkbox"/> | use <input type="checkbox"/> | disuse <input type="checkbox"/> |
| Date                                             | <b>15/02/18</b>              |                                 |
| Initials                                         | <b>8M4/CS/RC</b>             |                                 |
| Checked by                                       |                              |                                 |

CUT ASSOCIATED WITH THE CREATION OF AN  
OUTER ENCLOSURE RING DITCH. APPEARS CURVE-LINEAR  
IN PLAN.

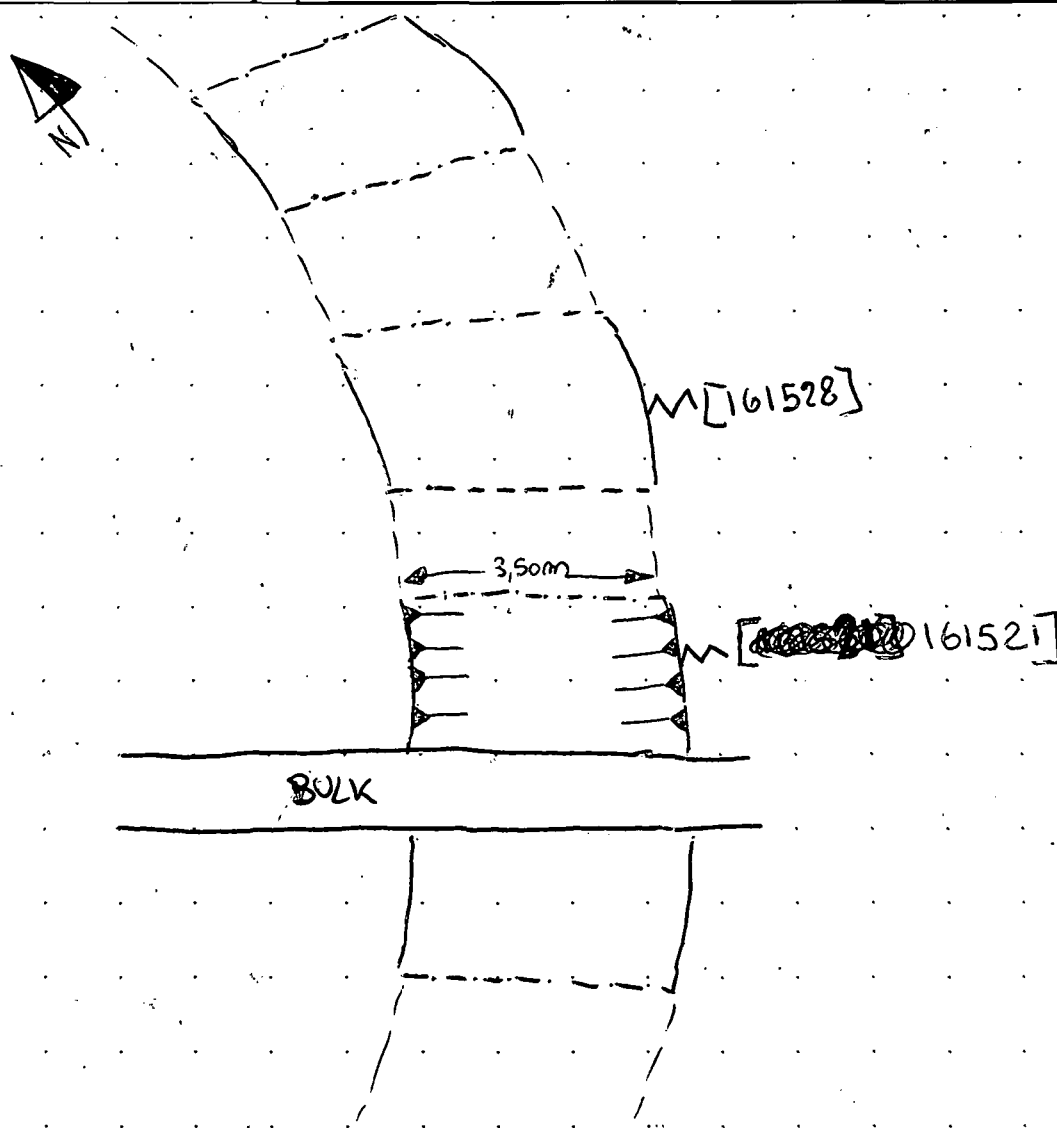
HAS A GENERAL "U" SHAPE ON EXCAVATION. LIKELY  
TO HAVE BEEN LATER REDESIGNED, AS CUT [161530] RESHAPED  
THE SIDES.

AS IT STANDS, SIDES LOOKED STEPPED INITIALLY AND  
THEN SLOPE DOWN AT QUITE A MODERATE ANGLE.

Refer to context (161529) FOR 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>TEA16</b> | Sub-area/Trench                   | Context number<br><b>(161522)</b>                                                                           |
| ECB#                    | Subgroup                   | Parent context<br><b>[161542]</b> | Context type<br>cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  |                 |  |  | Same as context |
|  |  | <b>(161522)</b> |  |  | Cuts context    |
|  |  | <b>[161542]</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>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)                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## 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 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"/> | 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>0.38m</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>M</b>                                                                                                                                                                    | 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"/>                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| bulk find <input type="checkbox"/>                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |                                                                                                                                                    |                             |
|------------|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| Sample nos | Finds nos | Photo nos<br><b>1610961-2</b>                                                                                                                      | Drawing nos<br><b>SH 28</b> |
|            |           | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D: 16264 D: 16270</b> |                             |

## Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>16/12/18</b><br>Initials <b>WE/CV</b><br>Checked by                                                   |

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

# ADDITIONAL INFORMATION

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

NATURAL INFILLING OF DITCH [161542]

IT WAS MODERATELY COMPACT, DARK GREY-BROWNISH  
COLOR AND SAND-SILTY TEXTURE.

THERE WAS A MODERATE PRESENCE OF ~~SMALL~~ SMALL AND  
MEDIUM STONES AND AN OCCASIONAL PRESENCE  
OF CHARCOAL.

FIND ONLY A PIECE OF POT CLOSE TO THE SURFACE.

Refer to context

[161523]

[161528]

## SKETCHES

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

## STRATIGRAPHY

|  |  |          |  |  |                 |         |
|--|--|----------|--|--|-----------------|---------|
|  |  | [61542]  |  |  | Same as context |         |
|  |  | (161523) |  |  | Cuts context    |         |
|  |  | (161524) |  |  | Cut by context  | [61542] |

## 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 |        |  <input type="checkbox"/> vertical<br> <input type="checkbox"/> steep<br> <input type="checkbox"/> moderate<br> <input type="checkbox"/> gentle<br> <input type="checkbox"/> stepped<br> <input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* |       |  <input type="checkbox"/> flat<br> <input type="checkbox"/> concave<br> <input type="checkbox"/> v-shaped<br> <input type="checkbox"/> sloping<br> <input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |
|  N                                                                                                                                                                                                                                                                                                                                                                                     |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 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"/>                                                                                                                                                                                                                                                                   |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |

## DESCRIPTION

# 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 checked="" type="checkbox"/> moderately compact            |                          | brownish <input checked="" type="checkbox"/> |                                         | brown <input type="checkbox"/>           |                                  |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| <input type="checkbox"/> loose                                    |                          | greyish <input type="checkbox"/>             |                                         | grey <input checked="" 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"/>          |                                  |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| Thickness                                                         |                          |                                              |                                         |                                          |                                  |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| 0.28m                                                             |                          |                                              |                                         |                                          |                                  |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| Inclusions                                                        |                          |                                              |                                         |                                          |                                  |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                  | chalk                                        | iron pan                                | manganese                                | charcoal                         | plant remains*           | wood                     | marine shell             | bone*                               | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                             | coarse stone             |                          |
| frequency                                                         | M                        |                                              |                                         |                                          | O                                |                          |                          |                          |                                     |                          |                          |                          |                          |                          |                          |                          |                          |                                     |                          |                          |
| bulk find                                                         | <input type="checkbox"/> | <input type="checkbox"/>                     | <input type="checkbox"/>                | <input type="checkbox"/>                 | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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

### CROSS REFERENCE

| Sample nos | Finds nos | Photo nos | Drawing nos                                                                                                                                            |
|------------|-----------|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
|            |           | 1610961-2 | S# 28<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D: 168269, D: 16270 |

### Basic process

construction ☐ use ☐ disuse ☒

Date: 16/2/18

Initials: WE

Checked by:

# ADDITIONAL INFORMATION

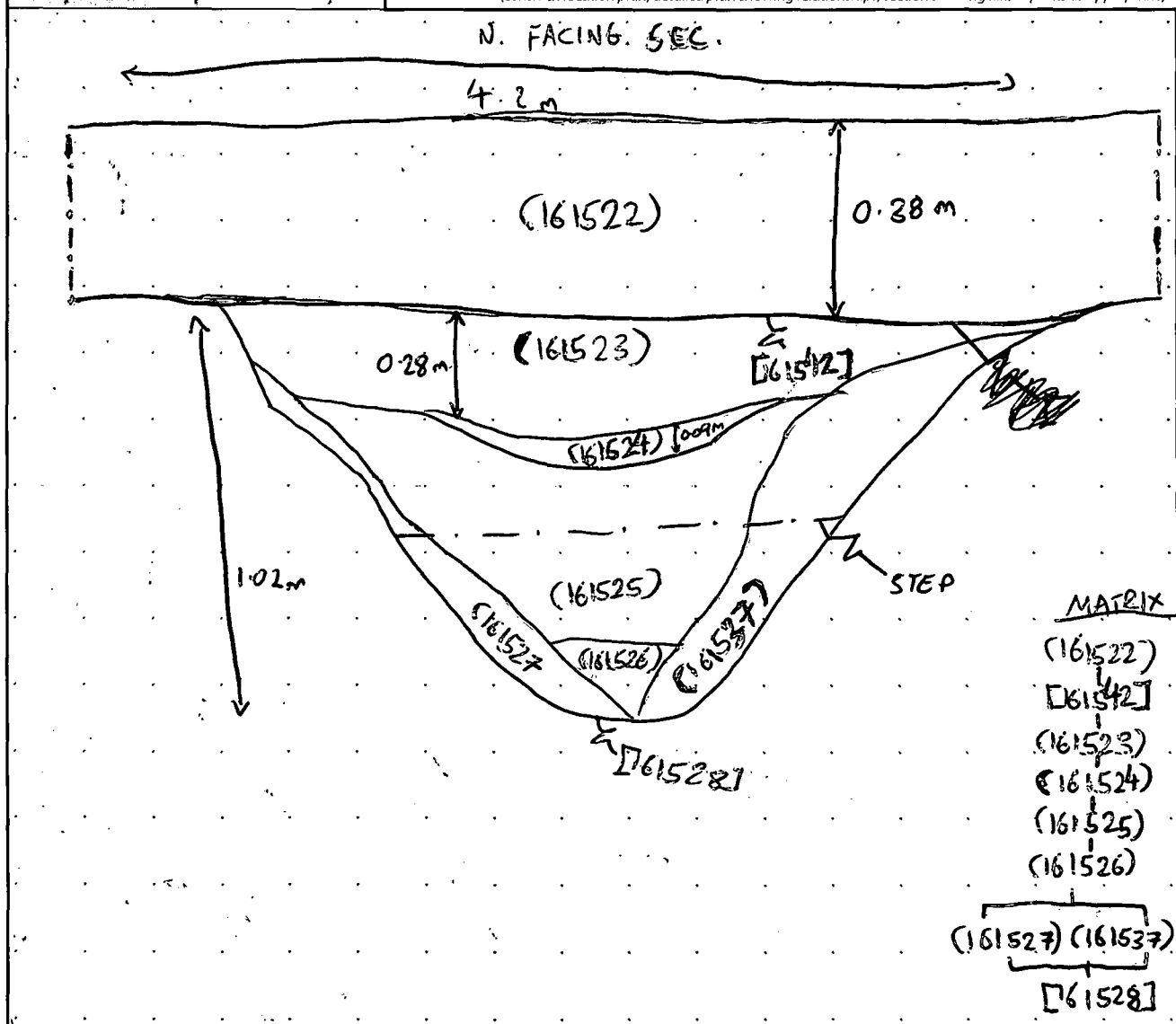
(any further details that may be important for understanding the context, including items marked \*overleaf)

FINAL FILL OF SLOT [161528] OF BARROW OUTER DITCH.  
HAS been cut by cut [161542]. LIKELY CREATED THROUGH  
NATURAL INFILLING. CONTAINED SOME BONE AND POT. CLAYEY MATERIAL  
WAS PROBABLY WASHED INTO THE DITCH

Refer to context [161528]

## 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>TEA16</b> | Sub-area/Trench                   | Context number<br><b>(161524)</b>                                                                                      |
| ECB#                    | Subgroup                   | Parent context<br><b>[161528]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161523)</b> |  |  | Same as context |
|  |  | <b>(161524)</b> |  |  | Cuts context    |
|  |  | <b>(161525)</b> |  |  | Cut by context  |

## CUT

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

## DESCRIPTION

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

## INTERPRETATION

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

|                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 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 type="checkbox"/><br>greyish <input type="checkbox"/> grey <input checked="" type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input checked="" type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | 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"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |
| 0.09m                                                                                                                                                            | 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                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                          |

## INTERPRETATION

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

|            |           |                                                                                                           |             |
|------------|-----------|-----------------------------------------------------------------------------------------------------------|-------------|
| Sample nos | Finds nos | Photo nos                                                                                                 | Drawing nos |
|            |           | 1610961-2                                                                                                 | 8H 28       |
|            |           | Surveyed:                                                                                                 |             |
|            |           | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |             |
|            |           | D: 16269                                                                                                  | D: 16270    |

## Basic process

|                                                                                                                                        |         |
|----------------------------------------------------------------------------------------------------------------------------------------|---------|
| <input type="checkbox"/> construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |         |
| Date                                                                                                                                   | 16/2/18 |
| Initials                                                                                                                               | WE      |
| Checked by                                                                                                                             |         |



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

THIN LAYER OF YELLOWISH GREY CLAY IN DITCH SLOT [61528]  
SEEMS TO HAVE COMPRESSED THE LOWER FILL OF ~~DITCH~~ (161525)  
BECAUSE IT IS MORE DENSE. MATERIAL LIKELY NATURALLY WASHED  
INTO THE FEATURE.

(161523)  
[161528]

(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       | TEAL6      |                 | (161525)                                                                                    |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                |
|           |            | [161528]        | cut <input type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161524) |  |  | Same as context |
|  |  | (161525) |  |  | Cuts context    |
|  |  | (161526) |  |  | 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                                                                                                                                                                                                                                                               | Length                                                                                                                                                                                                                                                                                | Width                                                                                                                                                                                                                             | Depth | Diameter |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of:</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                      |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |       |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |       |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input checked="" type="checkbox"/> compact<br><input type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input type="checkbox"/> mottled <input checked="" type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input 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>0.39m                                                                                                                                                             | 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                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency<br>bulk find                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |           |                                                                                                           |
|------------|-----------|-----------|-----------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos | Drawing nos                                                                                               |
|            |           | 161041-2  | Y# 28                                                                                                     |
|            |           | Surveyed: | plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> |
|            |           | D: 16264  | D: 16270                                                                                                  |

## Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date 16/2/18                                                                                                             |
| Initials WE/CLV                                                                                                          |
| Checked by                                                                                                               |

# ADDITIONAL INFORMATION

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

## NATURAL INFILLING OF DITCH [161542]

IT WAS COMPACT, MOTTLED BROWN-GREYISH COLOR, CLAY-SILTY TEXTURE.

FIND SOME BONES ~~THAT~~ THAT FOR THE TEXTURE OF THE LAYER IT WAS POSSIBLE TO EXTRACT THEM JUST FRAGMENTARY.

FIND ALSO SOME PLANT REMAINS (ROOTS)

Refer to context

161523  
161528

## 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>TEA16</b> | Sub-area/Trench                   | Context number<br><b>(161526)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>[161528]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |                 |  |                 |
|--|--|-----------------|-----------------|--|-----------------|
|  |  | <b>(161525)</b> |                 |  | Same as context |
|  |  | <b>(161526)</b> |                 |  | Cuts context    |
|  |  | <b>(161527)</b> | <b>(161537)</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>palace channel <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                                                                                                                               |  | <b>Sides</b><br>2 <input type="checkbox"/> vertical<br>2 <input type="checkbox"/> steep<br>2 <input type="checkbox"/> moderate sloping<br>2 <input type="checkbox"/> gentle<br>2 <input type="checkbox"/> stepped<br>2 <input type="checkbox"/> undercutting<br>2 <input type="checkbox"/> complex |              | <b>Base</b><br>1 <input type="checkbox"/> flat<br>1 <input type="checkbox"/> concave<br>1 <input type="checkbox"/> v-shaped<br>3 <input type="checkbox"/> sloping<br>3 <input type="checkbox"/> uneven<br>3 <input type="checkbox"/> complex* |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               |  | <b>Length</b>                                                                                                                                                                                                                                                                                      | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |  |                                                                                                                                                                                                                                                                                                    |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                    |              |                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                                                                                                                                                                                                                                                            |                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable |                          | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> |                          | <b>Composition</b><br>clayey <input 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 |                          | 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>0.28m</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 | Find nos | Photo nos<br><b>1610961-2</b>                                                                                          | Drawing nos<br><b>811 23</b> |
|            |          | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/> | <b>D:16264 D:16270</b>       |

## Basic process

|                                       |                              |                                            |
|---------------------------------------|------------------------------|--------------------------------------------|
| construction <input type="checkbox"/> | use <input type="checkbox"/> | disuse <input checked="" type="checkbox"/> |
| Date                                  | <b>16/2/18</b>               |                                            |
| Initials                              | <b>WE/CV</b>                 |                                            |
| Checked by                            |                              |                                            |

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

# ADDITIONAL INFORMATION

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

NATURAL INFILLING OF DITCH [161528]  
IT WAS MODERATELY COMPACT, LIGHT BROWN-GREYISH COLOR  
AND CLAY GRAVELLY TEXTURE.  
NO FINDS

Refer to context

161523  
161528

## SKETCHES

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



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

|                         |                            |                                     |                                                                                                                        |
|-------------------------|----------------------------|-------------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Site code<br><b>A14</b> | Area/Field<br><b>TEA16</b> | Sub-area/Trench                     | Context number<br><b>(16152.7)</b>                                                                                     |
| ECB #                   | Subgroup                   | Parent context<br><b>[16154.28]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161526) |  |  | Same as context |
|  |  | (161527) |  |  | Cuts context    |
|  |  | (161528) |  |  | 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 sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* | pit <input type="checkbox"/><br>post-hole <input type="checkbox"/><br>stake-hole <input type="checkbox"/><br>ditch <input type="checkbox"/><br>ring-ditch <input type="checkbox"/><br>beam slot <input type="checkbox"/><br>construction cut <input type="checkbox"/><br>robber cut <input type="checkbox"/><br>gully <input type="checkbox"/><br>palaeochannel <input type="checkbox"/><br>furrow <input type="checkbox"/><br>field boundary <input type="checkbox"/><br>burial cut <input type="checkbox"/><br>other cut (describe below) <input type="checkbox"/> |                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                         | <b>Width</b>                                                                                                                                                                                                                      | <b>Depth</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>Diameter</b> |
| <b>Shape: result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                      |                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |

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

## INTERPRETATION

[illegible]

### Basic process

|                                                                                     |                                                                                     |           |                                                                                                                                              |                                                                                                               |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-----------|----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos                                                                          | Finds nos                                                                           | Photo nos | Drawing nos                                                                                                                                  | <input type="checkbox"/> construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse |
|  |  | 1610961-2 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br>D: 16269, D: 16270 | Date: 16/2/19<br>Initials: WE/CW<br>Checked by:                                                               |

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

# ADDITIONAL INFORMATION

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

## NATURAL INFILLING OF DITCH [161528]

IT WAS MODERATELY COMPACT, MID BROWN-GREYISH COLOR AND CLAY-SANDY TEXTURE. WITH PRESENCE OF SMALL AND MEDIUM STONES.

IT WAS ON THE EAST SIDE AND IT WAS, PROBABLY, A SLIDING OF MATERIAL.

IT WAS SIMILAR TO (161537) THAT WAS ON THE WEST SIDE. THEY WAS SIMILAR FOR FORMATION AND MAYBE THEY FORMED TO THE SAME TIME.

NO FIND.

Refer to context

161523  
161528

## 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>TEA16</b> | Sub-area/Trench                  | Context number<br><b>[61528]</b>                                                                                       |
| ECB #                   | Subgroup<br><b>[61300]</b> | Parent context<br><b>[61528]</b> | Context type<br>cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                |                |  |                 |
|--|--|----------------|----------------|--|-----------------|
|  |  | <b>(61527)</b> | <b>(61537)</b> |  | Same as context |
|  |  | <b>[61528]</b> |                |  | Cuts context    |
|  |  | <b>(61003)</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 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 checked="" 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-SE<br><br><input checked="" type="checkbox"/> N                                                                                          | <b>Sides</b><br><input type="checkbox"/> vertical<br><input checked="" type="checkbox"/> steep<br><input checked="" type="checkbox"/> moderate sloping<br><input type="checkbox"/> gentle<br><input type="checkbox"/> stepped<br><input type="checkbox"/> undercutting<br><input type="checkbox"/> complex* | <b>Base</b><br><input type="checkbox"/> flat<br><input checked="" type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                                          | <b>Length</b><br><b>4m or</b>                                                                                                                                                                                                                                                                               | <b>Width</b><br><b>3.8 m</b>                                                                                                                                                                                                                 | <b>Depth</b><br><b>1.06m</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"/>                                       |                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                              |                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>OUTER BARROW DITCH</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 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"/> | <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>                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <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>                                                                                                                                                           | bulk find <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

### CROSS REFERENCE

|                        |                       |                               |                                                                                                                                                                                    |
|------------------------|-----------------------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos<br><b>/</b> | Finds nos<br><b>/</b> | Photo nos<br><b>1610961-2</b> | Drawing nos<br><b>8/ 2-8</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D: 16264 D: 16270</b> |
|------------------------|-----------------------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

### Basic process

|                                                                                                               |                                                         |
|---------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> | Date <b>16/2/18</b><br>Initials <b>WE</b><br>Checked by |
|---------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|

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

14.20

4-10

## ADDITIONAL INFORMATION

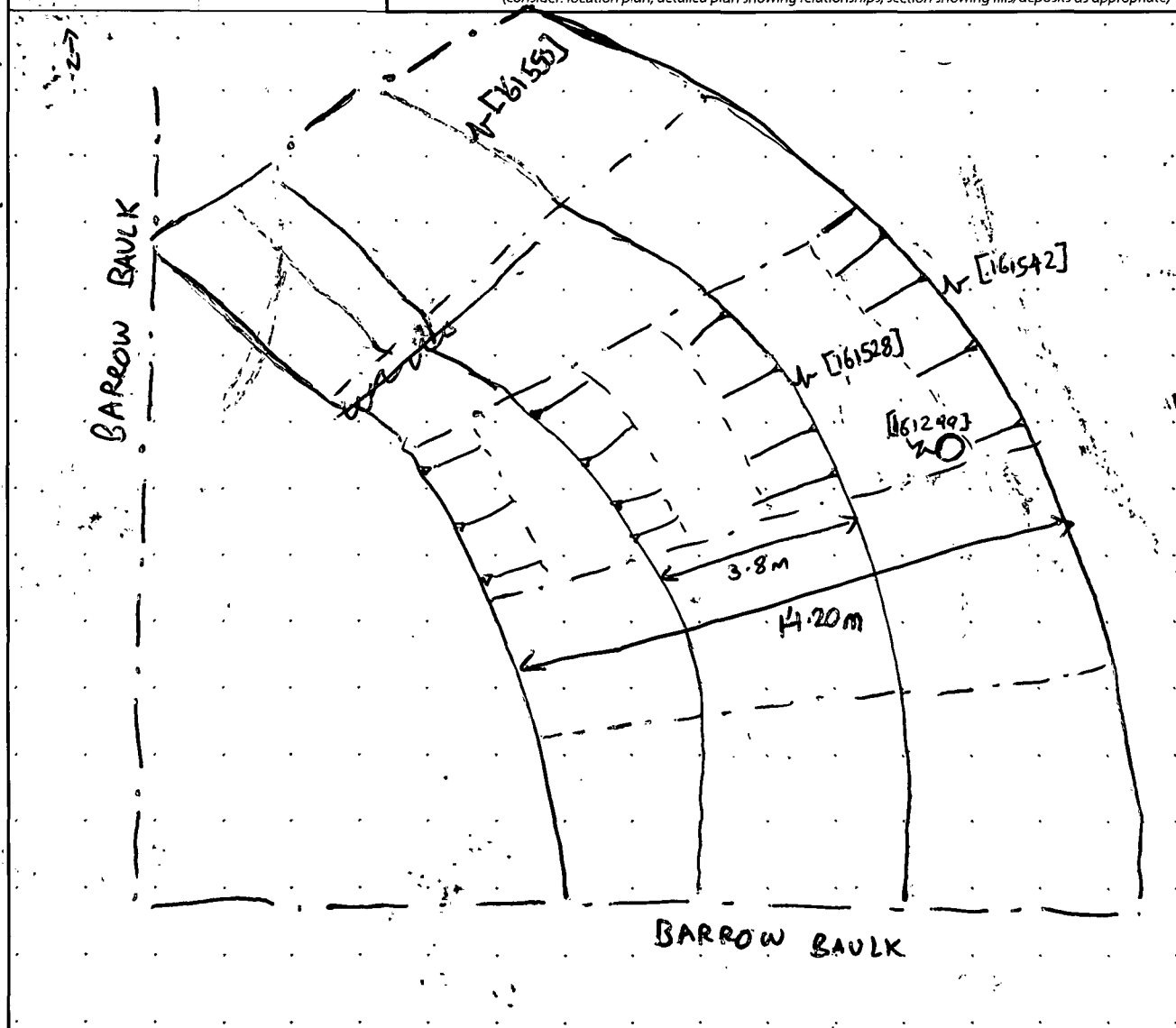
(any further details that may be important for understanding the context, including items marked \* overleaf)

CUT OF SLOT OF BARROW OUTER DITCH IN THE NORTH EAST QUADRANT. IT HAS ~~MODERATELY~~ ~~SLO~~ MODERATELY SLOPING SIDES AND A CONCAVE BASE. SEEMS VERY CONSISTENT WITH OTHER NEARBY SLOTS OF THE DITCH. APPEARS TO BE CUT BY [161542] WHICH MAY BE A RE-CUT OF THE DITCH, BUT THIS NOT CERTAIN

Refer to context (161523)

## 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 16</b> | Sub-area/Trench                   | Context number<br><b>(161529)</b>                                                                                      |
| ECR#                    | Subgroup<br><b>[161521]</b> | Parent context<br><b>[161300]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

### STRATIGRAPHIC MATRIX

### STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161002)</b> |  |  | Same as context |
|  |  | <b>(161529)</b> |  |  | Cuts context    |
|  |  | <b>[161530]</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>H <input type="checkbox"/> E-W<br>✓ <input type="checkbox"/> NE-SW<br>✓ <input type="checkbox"/> NW-SE<br>N<br>(N arrow)                                                                                                             | <b>Sides</b><br>L <input type="checkbox"/> vertical<br>\ <input type="checkbox"/> steep<br>/ <input type="checkbox"/> moderate<br>~ <input type="checkbox"/> gentle<br>~ <input type="checkbox"/> stepped<br>Z <input type="checkbox"/> undercutting<br>~ <input type="checkbox"/> complex* | <b>Base</b><br>— <input type="checkbox"/> flat<br>U <input type="checkbox"/> concave<br>V <input type="checkbox"/> v-shaped<br>/ <input type="checkbox"/> sloping<br>~ <input type="checkbox"/> uneven<br>~ <input type="checkbox"/> complex* |                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b><br><u>4.5m</u>                                                                                                                                                                                                                                                                | <b>Width</b><br><u>4.5m</u>                                                                                                                                                                                                                   | <b>Depth</b><br><u>0.92m</u> | <b>Diameter</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Shape result of</b> (tick all that apply)<br>design <input type="checkbox"/> material cut into <input type="checkbox"/> natural processes <input type="checkbox"/> degree of truncation <input type="checkbox"/> uncertain <input type="checkbox"/>                                       |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                               |                              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

### FILL/DEPOSIT

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

### DESCRIPTION

### INTERPRETATION

|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input checked="" type="checkbox"/> brown <input type="checkbox"/><br>greyish <input type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/> | <b>Composition</b><br>clayey <input type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input checked="" type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/>                                                                                                                                                                                                                                                                                                        | topsoil <input type="checkbox"/><br>subsoil <input type="checkbox"/><br>geological subsoil <input type="checkbox"/><br>remnant topsoil <input type="checkbox"/><br>surface <input type="checkbox"/><br>occupation layer <input type="checkbox"/><br>dumped layer <input type="checkbox"/><br>deliberate backfill <input checked="" type="checkbox"/><br>destruction debris <input type="checkbox"/><br>bedding layer <input type="checkbox"/><br>natural infilling <input checked="" type="checkbox"/><br>colluvial layer <input type="checkbox"/><br>in situ burning <input type="checkbox"/><br>post-pipe <input type="checkbox"/><br>packing <input type="checkbox"/><br>cremation <input type="checkbox"/><br>other fill/deposit (describe below) <input type="checkbox"/> |
| <b>Thickness</b><br><u>0.92 m</u>                                                                                                                                                     | 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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

### CROSS REFERENCE

|            |           |                      |                                                                                                                                          |
|------------|-----------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos            | Drawing nos                                                                                                                              |
|            |           | 1610947 -<br>1610960 | 8H 20<br>Surveyed:<br>plan <input type="checkbox"/> section <input type="checkbox"/> levels <input type="checkbox"/><br># 16285<br>16286 |

### Basic process

|                                                                                                               |
|---------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input type="checkbox"/> |
| Date <b>15/02/18</b>                                                                                          |
| Initials <b>SMK/KS/RC</b>                                                                                     |
| Checked by                                                                                                    |

# ADDITIONAL INFORMATION

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

UPPER FILL OF DITCH SLOT. THOUGHT AT THIS POINT TO REPRESENT THE BACKFILL OF A POTENTIAL RECT - [161530]

APPEARS QUITE DARK; WITH A HIGH SILT CONTENT. SIMILAR CONSISTENCY TO THAT SEEN ON REMOVAL OF UPPER MATERIAL IN OTHER DITCH SLOTS.

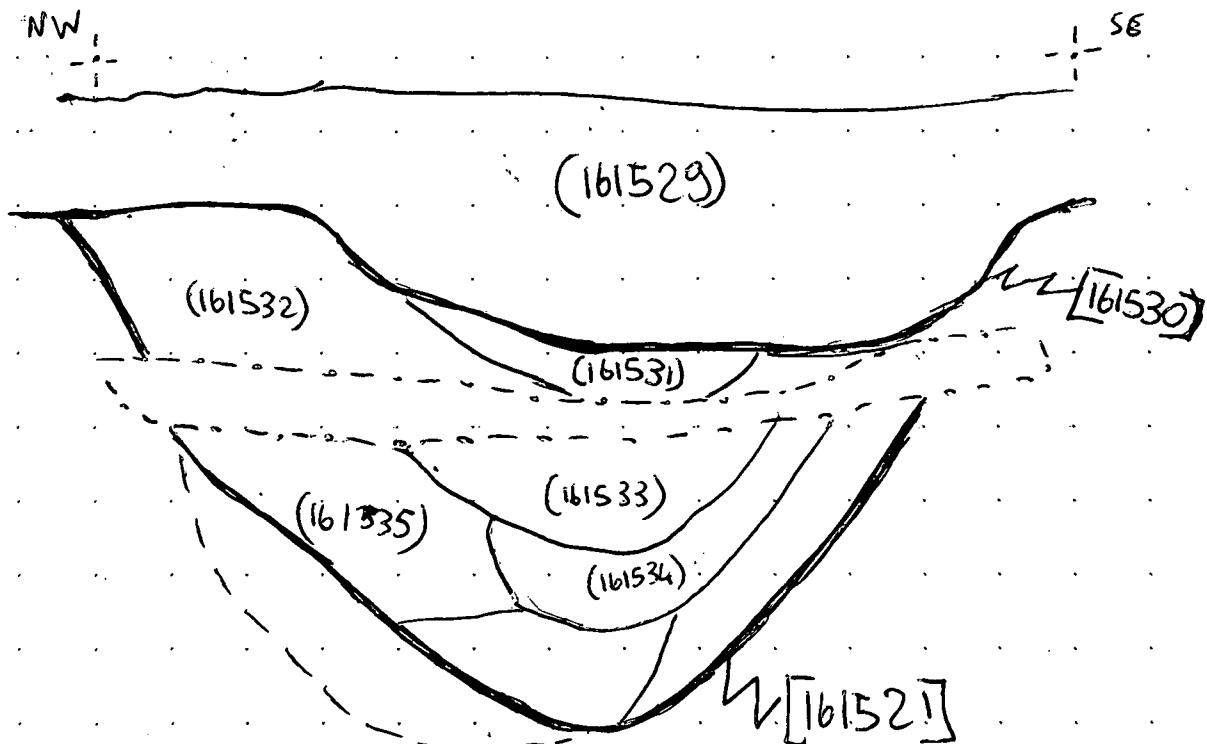
SOME PIECES OF FLINT DEBITAGE OBSERVED, ALONG WITH OTHER WORKED PIECES.

POTTER'S FRAGMENT ALSO UNCOVERED. SMALL, SUB-ANGULAR STONES NOTED THROUGHOUT.

Refer to context [161521] FOR PLAN

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

## SKETCHES





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

|           |            |                 |                                                                                                        |
|-----------|------------|-----------------|--------------------------------------------------------------------------------------------------------|
| Site code | Area/Field | Sub-area/Trench | Context number                                                                                         |
| A14       | TEA 16     |                 | [161530]                                                                                               |
| ECB #     | Subgroup   | Parent context  | Context type                                                                                           |
|           | [16152]    | [161300]        | cut <input checked="" type="checkbox"/> fill <input type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161529) |  |  | Same as context |
|  |  | (161530) |  |  | Cuts context    |
|  |  | (161531) |  |  | Cut by context  |

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

## INTERPRETATION

|                                                                                                                                                                                                                                                                                         |                               |                                                                                                                                                                                                                                                                                                                          |                               |                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|---------------------|
| Shape <u>OBSERVED VIA SLOT</u>                                                                                                                                                                                                                                                          |                               |                                                                                                                                                                                                                                                                                                                          |                               |                     |
| 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><br>I <input type="checkbox"/> N-S<br>II <input checked="" type="checkbox"/> E-W<br>III <input type="checkbox"/> NE-SW<br>IV <input type="checkbox"/> NW-SE<br><br>N<br>                                                                                              |                               | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>II <input type="checkbox"/> steep<br>III <input checked="" type="checkbox"/> moderate<br>IV <input type="checkbox"/> gentle<br>V <input type="checkbox"/> stepped<br>VI <input type="checkbox"/> undercutting<br>VII <input type="checkbox"/> complex*<br>sloping |                               |                     |
|                                                                                                                                                                                                                                                                                         |                               | <b>Base</b><br>I <input type="checkbox"/> flat<br>II <input type="checkbox"/> concave<br>III <input type="checkbox"/> v-shaped<br>IV <input checked="" type="checkbox"/> sloping<br>V <input type="checkbox"/> uneven<br>VI <input type="checkbox"/> complex*                                                            |                               |                     |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                          | <b>Length</b><br><u>3.5 m</u> | <b>Width</b><br><u>4.5 m</u>                                                                                                                                                                                                                                                                                             | <b>Depth</b><br><u>0.82 m</u> | <b>Diameter</b><br> |
| 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"/>                              |                               |                                                                                                                                                                                                                                                                                                                          |                               |                     |

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) ☐

**DITCH RECORD**

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

# INTERPRETATION

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

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

### Basic process

|            |                                                                                     |                    |                                                                                                                                                              |                                                                                                               |
|------------|-------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
| Sample nos | Findings nos                                                                        | Photo nos          | Drawing nos                                                                                                                                                  | construction <input checked="" type="checkbox"/> use <input type="checkbox"/> disuse <input type="checkbox"/> |
|            |  | 160947 -<br>160960 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br># <del>160947</del> 16285<br>16286 | Date 15/02/18<br>Initials SMCL/K<br>Checked by                                                                |

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

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

SLOPES DOWN TO THE EAST AND FADES OUT - WHICH MAY BE INDICATIVE THAT THE MATERIAL HAS BEEN CUT OR LANDSCAPED FROM ONLY ONE SIDE.

Refer to context [161521] FOR PLAN

(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 16</b> | Sub-area/Trench                 | Context number<br><b>(161531)</b>                                                                                      |
| ECB#                    | Subgroup<br><b>161521</b>   | Parent context<br><b>161300</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>161530</b>   |  |  | Same as context |
|  |  | <b>(161531)</b> |  |  | Cuts context    |
|  |  | <b>(161532)</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                                                                                                                                                                                                                                                               | Length                                                                                                                                                                                                                                                                                | Width                                                                                                                                                                                                                             | Depth | Diameter |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <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 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 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><b>0.14 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                                                                                                                                                                             | stones*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | chalk                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | iron pan                 | manganese                | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |
| bulk find                                                                                                                                                                             | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## CROSS REFERENCE

|            |           |                    |                                                                                                                                                     |
|------------|-----------|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos          | Drawing nos                                                                                                                                         |
|            |           | 160947 -<br>160960 | SH 30<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br># 16285<br>16286 |

## Basic process

|                                                  |                              |                                            |
|--------------------------------------------------|------------------------------|--------------------------------------------|
| construction <input checked="" type="checkbox"/> | use <input type="checkbox"/> | disuse <input checked="" type="checkbox"/> |
| Date                                             | 15/02/18                     |                                            |
| Initials                                         | SMK / CS / RE                |                                            |
| Checked by                                       |                              |                                            |

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



# ADDITIONAL INFORMATION

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

A FAIRLY THIN, ISOLATED DEPOSIT OF CLAY WITHIN THE DITCH  
SLOT. QUITE HEAVY AND THICK WHEN EXCAVATED.

STERILE AND QUITE HOMOGENEOUS, WITH THE ODD CHARCOAL  
FLAKE AND MANGANESE SPREAD.

LIKELY THE RESULT OF A BUILD UP OF STANDING WATER.

(161528) FOR SECTION

Refer to context

[161521] FOR PLAN

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

SKETCHES

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161531) |  |  | Same as context |
|  |  | (161532) |  |  | Cuts context    |
|  |  | (161533) |  |  | 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><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

| Compaction                                                        |                                           | Colour                                                                                                                                |                                                                                                                                                                                                                              | Composition                                                              |                                                                                                                                                                                |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|-------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | <input checked="" type="checkbox"/> loose | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/> | <input checked="" type="checkbox"/> brown<br><input type="checkbox"/> grey<br><input checked="" type="checkbox"/> orange<br><input type="checkbox"/> yellow<br><input type="checkbox"/> red<br><input type="checkbox"/> blue | clayey <input checked="" type="checkbox"/> <input type="checkbox"/> clay | <input type="checkbox"/> clay<br><input checked="" type="checkbox"/> silt<br><input type="checkbox"/> sand<br><input type="checkbox"/> gravel<br><input type="checkbox"/> peat |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> moderately compact                       |                                           | brownish <input type="checkbox"/>                                                                                                     |                                                                                                                                                                                                                              | silty <input type="checkbox"/>                                           |                                                                                                                                                                                |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input checked="" type="checkbox"/> friable                       |                                           | greyish <input type="checkbox"/>                                                                                                      |                                                                                                                                                                                                                              | sandy <input type="checkbox"/>                                           |                                                                                                                                                                                |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                           | orangeish <input checked="" type="checkbox"/>                                                                                         |                                                                                                                                                                                                                              | gravelly <input type="checkbox"/>                                        |                                                                                                                                                                                |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   |                                           | yellowish <input type="checkbox"/>                                                                                                    |                                                                                                                                                                                                                              | peaty <input type="checkbox"/>                                           |                                                                                                                                                                                |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                           |                                                                                                                                       |                                                                                                                                                                                                                              |                                                                          |                                                                                                                                                                                |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0.44 m                                                            |                                           | 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                                                         | F                                         |                                                                                                                                       |                                                                                                                                                                                                                              | 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 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.                                                                                                                                                | <input type="checkbox"/> construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse |
|-------------|------------|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|
|             |            | 160947 -<br>160960 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br># <del>16285</del> 16285<br>16286 | Date 15/02/18<br>Initials SML/C<br>Checked by                                                                 |

# ADDITIONAL INFORMATION

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

A FAIRLY LOOSE, GRAVEL TYPE FILL LOCATED ALONG THE  
EASTERN PERIPHERIES OF THE DITCH EDGE. APPEARS TO SLOPE  
DOWNWARDS TO THE WEST.

FREQUENT SMALL SUB-ANGULAR STONE INCLUSIONS  
POSSIBLY REDEPOSITED BANK/MOUND MATERIAL WITHIN THE  
DITCH.

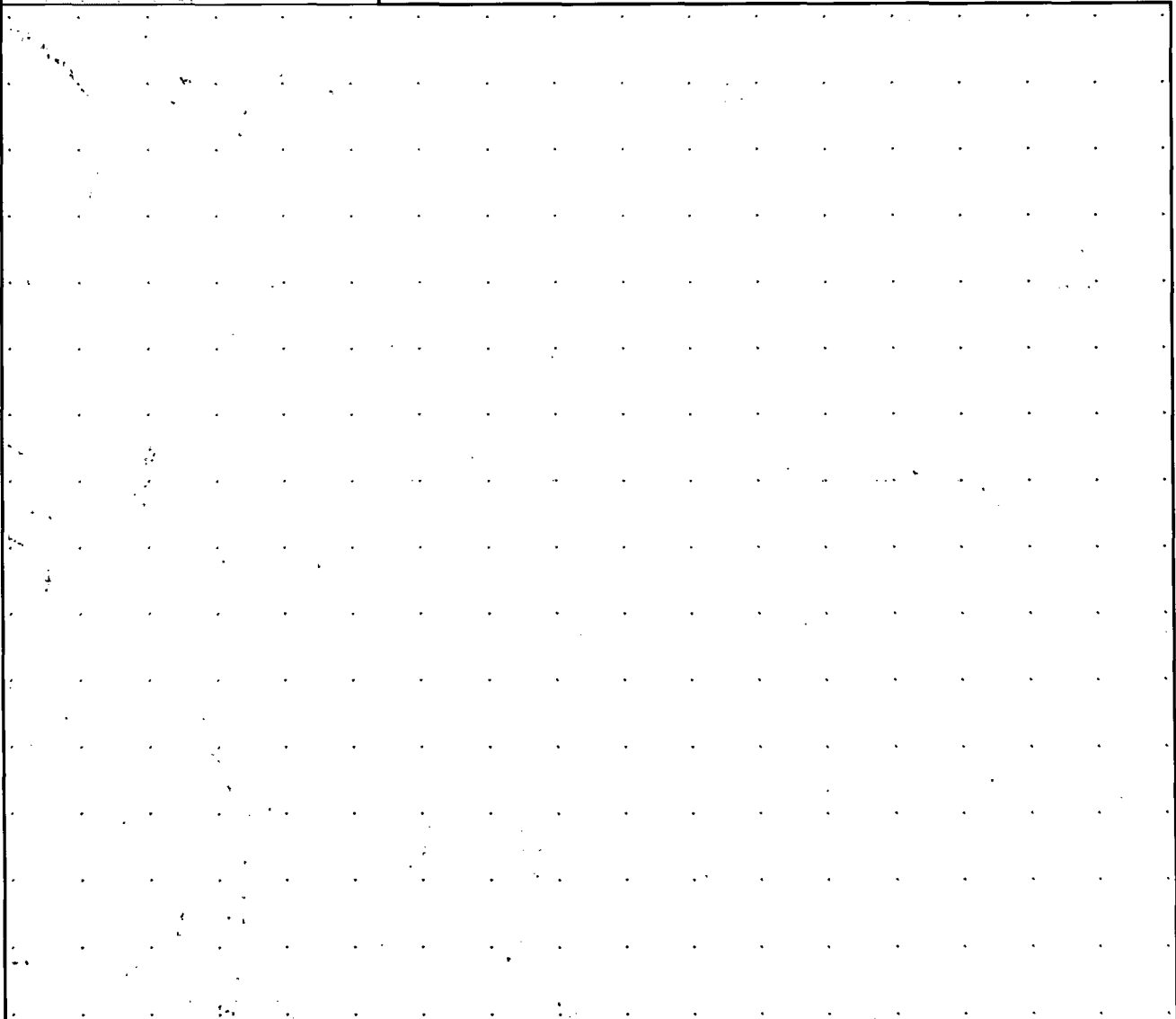
(161528) FOR SECTION

Refer to context

[161521] 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>TEA 16</b> | Sub-area/Trench<br><b>/</b>     | Context number<br><b>(161533)</b>                                                                                      |
| ECB#<br><b>/</b>        | Subgroup<br><b>161521</b>   | Parent context<br><b>161300</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161532) |  |  | Same as context |
|  |  | (161533) |  |  | Cuts context    |
|  |  | (161534) |  |  | 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"/>                                       |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                   |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## FILL/DEPOSIT

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

## DESCRIPTION

## INTERPRETATION

|                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Compaction</b><br><input type="checkbox"/> compact<br><input checked="" type="checkbox"/> moderately compact<br><input type="checkbox"/> loose<br><input type="checkbox"/> friable | <b>Colour</b><br>light <input type="checkbox"/> mid <input checked="" type="checkbox"/> dark <input type="checkbox"/> mottled <input type="checkbox"/><br>brownish <input type="checkbox"/> brown <input checked="" type="checkbox"/><br>greyish <input checked="" type="checkbox"/> grey <input type="checkbox"/><br>orangeish <input type="checkbox"/> orange <input type="checkbox"/><br>yellowish <input type="checkbox"/> yellow <input type="checkbox"/><br>reddish <input type="checkbox"/> red <input type="checkbox"/><br>blueish <input type="checkbox"/> blue <input type="checkbox"/>                                                                                     | <b>Composition</b><br>clayey <input checked="" type="checkbox"/> clay <input type="checkbox"/><br>silty <input type="checkbox"/> silt <input checked="" type="checkbox"/><br>sandy <input type="checkbox"/> sand <input type="checkbox"/><br>gravelly <input type="checkbox"/> gravel <input type="checkbox"/><br>peaty <input type="checkbox"/> peat <input type="checkbox"/> | 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>0.32 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                                                                                                                                                                             | 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"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <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                                                                                                                                          |
|            |           | 160947 -<br>160960 | # 30<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br># 16285<br># 16286 |

## Basic process

|                                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|
| construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse <input checked="" type="checkbox"/> |
| Date <b>15/02/18</b>                                                                                                     |
| Initials <b>SMK/KS/R.C.</b>                                                                                              |
| Checked by                                                                                                               |

# ADDITIONAL INFORMATION

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

A SOFT AND STICKY FILL LOCATED PRIMARILY IN THE  
CENTRAL PORTION OF THE DITCH. CHARCOAL FLECKS WITH  
MODERATE SMALL, SUB-ANGULAR STONES PRESENT.  
LIKELY THE MOST SUBSTANTIAL OF THE BASAL  
FILLS.

(161528) FOR SECTION

Refer to context

[161521] FOR

PLAN

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

SKETCHES

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161533) |  |  | Same as context |
|  |  | (161534) |  |  | Cuts context    |
|  |  | (161535) |  |  | Cut by context  |

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

## INTERPRETATION

|                                                                                                                                                                                                                                                                              |        |                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Shape                                                                                                                                                                                                                                                                        |        |                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                    |
| sub- <input type="checkbox"/> rectangular <input type="checkbox"/> square <input type="checkbox"/> circular <input type="checkbox"/> linear <input type="checkbox"/> curvilinear <input type="checkbox"/> irregular <input type="checkbox"/> other* <input type="checkbox"/> |        |                                                                                                                                                                                                                                                               |       |                                                                                                                                                                                                                    |
| Orientation                                                                                                                                                                                                                                                                  |        | Sides                                                                                                                                                                                                                                                         |       | Base                                                                                                                                                                                                               |
| <input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE<br><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* |       | <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                                                                                                                                                | <input type="checkbox"/> construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse |
|            |           | 160947 -<br>160960 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><del>16285</del> #16285<br>16286 | Date: 15/02/18<br>Initials: SM<br>Checked by:                                                                 |

# ADDITIONAL INFORMATION

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

A MIXED AND MOTTLED FILL THAT IS QUITE DIFFERENT FROM THAT ABOVE AND BELOW DUE TO THE HIGH CONTENT OF SMALL SUB-ANGULAR STONES.

(161529) FOR SECTION

Refer to context

[161521] FOR PLAN

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

SKETCHES



## STRATIGRAPHY

|  |  |           |  |  |                 |
|--|--|-----------|--|--|-----------------|
|  |  | (161534)  |  |  | Same as context |
|  |  | (161535)  |  |  | Cuts context    |
|  |  | ✓(161536) |  |  | Cut by context  |

## 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><br><input type="checkbox"/> N-S<br><input type="checkbox"/> E-W<br><input type="checkbox"/> NE-SW<br><input type="checkbox"/> NW-SE                                                 | <b>Sides</b><br><div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> vertical<br/> <input type="checkbox"/> steep<br/> <input type="checkbox"/> moderate<br/> <input type="checkbox"/> gentle<br/> <input type="checkbox"/> stepped<br/> <input type="checkbox"/> undercutting<br/> <input type="checkbox"/> complex*         </div> <div>           sloping         </div> </div> |              | <b>Base</b><br><input type="checkbox"/> flat<br><input type="checkbox"/> concave<br><input type="checkbox"/> v-shaped<br><input type="checkbox"/> sloping<br><input type="checkbox"/> uneven<br><input type="checkbox"/> complex* |                 |
| <b>Dimensions</b><br>in metres.                                                                                                                                                                                                                                                              | <b>Length</b>                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>Width</b> | <b>Depth</b>                                                                                                                                                                                                                      | <b>Diameter</b> |
| <b>Shape result of:</b> (tick all that apply)<br>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"/>                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                            |              |                                                                                                                                                                                                                                   |                 |

## DESCRIPTION

# INTERPRETATION

| Compaction                                                        |                                                                                                                                       | Colour                                                                                        |                                                             | Composition              |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|-------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> compact                                  | light <input type="checkbox"/> mid <input type="checkbox"/> dark <input checked="" type="checkbox"/> mottled <input type="checkbox"/> | clayey <input type="checkbox"/>                                                               | clay <input type="checkbox"/>                               |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input checked="" type="checkbox"/> moderately compact            | brownish <input type="checkbox"/> <input checked="" type="checkbox"/> brown                                                           | silty <input checked="" type="checkbox"/>                                                     | silt <input type="checkbox"/>                               |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> loose                                    | greyish <input checked="" type="checkbox"/> <input type="checkbox"/> grey                                                             | sandy <input type="checkbox"/>                                                                | sand <input type="checkbox"/>                               |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <input type="checkbox"/> friable                                  | orangeish <input type="checkbox"/> <input type="checkbox"/> orange                                                                    | gravelly <input type="checkbox"/> <input checked="" type="checkbox"/> gravel                  | peat <input type="checkbox"/> <input type="checkbox"/> peat |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   | yellowish <input type="checkbox"/> <input type="checkbox"/> yellow                                                                    |                                                                                               |                                                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   | reddish <input type="checkbox"/> <input type="checkbox"/> red                                                                         |                                                                                               |                                                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|                                                                   | blueish <input type="checkbox"/> <input type="checkbox"/> blue                                                                        |                                                                                               |                                                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| Thickness                                                         |                                                                                                                                       |                                                                                               |                                                             |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0-18 m                                                            |                                                                                                                                       | 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                        |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 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) ☐

### CROSS REFERENCE

### Basic process

|            |           |                    |                                                                                                                                                             |                                                                                                    |
|------------|-----------|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos          | Drawing nos                                                                                                                                                 | <input type="checkbox"/> construction <input type="checkbox"/> use <input type="checkbox"/> disuse |
|            |           | 160947 -<br>160960 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br># <del>16285</del> 16285<br>16286 | Date 15/02/18<br>Initials SMZ/10<br>Checked by                                                     |

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

# ADDITIONAL INFORMATION

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

A SILTY, GRAVEL TYPE MATERIAL OBSERVED IN THE LOWER EASTERN PERIPHERY OF THE DITCH CUT. QUITE SANDY IN PLACES. WITH OBSERVATIONS OF MANGANESE AND POCKETS OF SMALL SUB-ANGULAR STONES.

(161529) FOR SECTION

Refer to context [161521] FOR 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 16</b> | Sub-area/Trench<br><b>161300</b>  | Context number<br><b>161536</b>                                                                                        |
| ECB #                   | Subgroup<br><b>[161521]</b> | Parent context<br><b>[161300]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161535) |  |  | Same as context |
|  |  | (161536) |  |  | Cuts context    |
|  |  | (161538) |  |  | 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>II <input type="checkbox"/> E-W<br>III <input type="checkbox"/> NE-SW<br>IV <input type="checkbox"/> NW-SE<br>N <input type="checkbox"/>                                                                                             | <b>Sides</b><br>I <input type="checkbox"/> vertical<br>II <input type="checkbox"/> steep<br>III <input type="checkbox"/> moderate<br>IV <input type="checkbox"/> gentle<br>V <input type="checkbox"/> stepped<br>VI <input type="checkbox"/> undercutting<br>VII <input type="checkbox"/> complex* | <b>Base</b><br>I <input type="checkbox"/> flat<br>II <input type="checkbox"/> concave<br>III <input type="checkbox"/> v-shaped<br>IV <input type="checkbox"/> sloping<br>V <input type="checkbox"/> uneven<br>VI <input type="checkbox"/> complex* |              |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <b>Dimensions</b><br>in metres                                                                                                                                                                                                                                                               | <b>Length</b>                                                                                                                                                                                                                                                                                      | <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 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 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>0.16 m</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>Inclusions</b><br>use the following:<br>O: occasional<br>M: moderate<br>F: frequent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| stones* <input type="checkbox"/><br>chalk <input type="checkbox"/><br>iron pan <input type="checkbox"/><br>manganese <input type="checkbox"/><br>charcoal <input type="checkbox"/><br>plant remains* <input type="checkbox"/><br>wood <input type="checkbox"/><br>marine shell <input type="checkbox"/><br>bone* <input type="checkbox"/><br>pot <input type="checkbox"/><br>fired clay / CBM <input type="checkbox"/><br>CTP <input type="checkbox"/><br>mortar/plaster <input type="checkbox"/><br>leather/textile <input type="checkbox"/><br>glass <input type="checkbox"/><br>metal <input type="checkbox"/><br>industrial waste <input type="checkbox"/><br>lithics <input type="checkbox"/><br>coarse stone <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>frequency</b><br>bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | bulk find <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

## CROSS REFERENCE

|            |           |                   |                                                                                                                                                       |
|------------|-----------|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos         | Drawing nos                                                                                                                                           |
|            |           | 160947-<br>160960 | S# 30<br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br># 16285<br># 16286 |

## Basic process

construction ☐ use ☐ disuse ☒

Date **15/02/18**

Initials **SM/L/CS/RE**

Checked by

# ADDITIONAL INFORMATION

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

A MIXED AND MOTTLED BASE FILL OF THE DITCH. ALTHOUGH  
PRIMARILY CLAYS, SOME SANDS LENSES CAN BE OBSERVED  
THROUGHOUT.

HIGHER MANGANESE CONTENT, LIKELY DUE TO  
VEGETATION DISTURBANCE OR STANDING WATER.

(161523) FOR SECTION

Refer to context [161521] FOR 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>TEA16</b> | Sub-area/Trench                   | Context number<br><b>(161537)</b>                                                                                      |
| ECB #                   | Subgroup                   | Parent context<br><b>[161528]</b> | Context type<br>cut <input type="checkbox"/> fill <input checked="" type="checkbox"/> deposit <input type="checkbox"/> |

## STRATIGRAPHIC MATRIX

## STRATIGRAPHY

|  |  |                 |  |  |                 |
|--|--|-----------------|--|--|-----------------|
|  |  | <b>(161526)</b> |  |  | Same as context |
|  |  | <b>(161537)</b> |  |  | Cuts context    |
|  |  | <b>[161528]</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>(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>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 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 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 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 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"/>                                                                                                                                                                                                                                                                                                        | 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>0.48m</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"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| frequency <b>F</b>                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

## CROSS REFERENCE

|            |           |                               |                                                                                                                                                                              |
|------------|-----------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Sample nos | Finds nos | Photo nos<br><b>1610461-2</b> | Drawing nos<br><b>28</b><br>Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br><b>D: 16269, 16270</b> |
|------------|-----------|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Basic process

|                                                                                                               |                                                              |
|---------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| construction <input type="checkbox"/> use <input type="checkbox"/> disuse <input checked="" type="checkbox"/> | Date <b>16/2/19</b><br>Initials <b>WE / CV</b><br>Checked by |
|---------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|

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

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

IT WAS LOOSE, MID GREY-REDDISH COLOR AND SAND-CLAYEY TEXTURE WITH FREQUENT PRESENCE OF SMALL AND MEDIUM STONES.

IT WAS ON THE WEST SIDE. AND IT WAS, PROBABLY,  
A SLIDING OF MATERIAL.

IT WAS SIMILAR FOR FORMATION AND MAYBE IT IS FORMED TO THE SAME TIME OF (161527).

NO FIND.

161523  
161528

## SKETCHES

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



## STRATIGRAPHY

|  |  |          |  |  |                 |
|--|--|----------|--|--|-----------------|
|  |  | (161536) |  |  | Same as context |
|  |  | (161538) |  |  | Cuts context    |
|  |  | [161003] |  |  | 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 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 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 checked="" 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"/>                                                                       |  |                                                                                                                                                                                                                                                                                  |       |                                                                                                                                                                                                                                          |

(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"/> | 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"/> | 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"/> |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Thickness</b>                                                  |                                                        |                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 0-26 m                                                            |                                                        | black <input type="checkbox"/> white <input type="checkbox"/> other* <input type="checkbox"/>                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                         | other* <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| <b>Inclusions</b>                                                 |                                                        |                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| use the following:<br>O: occasional<br>M: moderate<br>F: frequent | stones*                                                | chalk                                                                                                                                 | iron pan                                                                                                                                                                                                                                                                                                                                                                                                                                | manganese                                                                                                                                                                                                                                                                                                                                                | charcoal                 | plant remains*           | wood                     | marine shell             | bone*                    | pot                      | fired clay / CBM         | CTP                      | mortar/plaster           | leather/textile          | glass                    | metal                    | industrial waste         | lithics                  | coarse stone             |                          |
| frequency                                                         |                                                        |                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                         | O                                                                                                                                                                                                                                                                                                                                                        |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
| 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                                                                                                                                | <input type="checkbox"/> construction <input type="checkbox"/> use <input checked="" type="checkbox"/> disuse |
|            |           | 160943 -<br>160960 | Surveyed:<br>plan <input type="checkbox"/> section <input checked="" type="checkbox"/> levels <input type="checkbox"/><br># 16285<br>16286 | Date: 15/02/18<br>Initials: SMZ/<br>Checked by:                                                               |



# ADDITIONAL INFORMATION

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

AN ISOLATED BAND OF CLAYEY SILT LOCATED IN THE LOWER WESTERN PERIPHERY OF THE DITCH EDGE. AN ORANGE TINT IS PRESENT THROUGHOUT, WITH MANGANESE SPREADS THROUGHOUT. QUITE STERILE IN TERMS OF STONE INCLUSIONS.

(161523) FOR SECTION

Refer to context

[161521] FOR PLAN

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

SKETCHES