

CONTEXT SHEET

Date <u>31.8.2017</u>	Excavator <u>HG</u>	Excavation Area <u>C</u>	Context: <u>4008</u>
Context Type: <input checked="" type="checkbox"/> Cut <input type="checkbox"/> Fill <input type="checkbox"/> Layer <input type="checkbox"/> Wall <input type="checkbox"/> Other: _____		Complete? _____	

Description	
<u>Deposit:</u> Compaction, colour, composition, particle size, inclusions, thickness and extent, comments, method & conditions	
<u>Cut:</u> Shape in plan, corners, dimensions/ depth, break of slope at top, sides, break of slope at base, base, orientation, inclination of axis, truncated (if known), fill #'s, comments	
<u>Layers:</u> Compaction, colour, composition, particle size, inclusions, thickness and extent, comments, method and conditions	
<u>Walls:</u> Shape in plan, dimensions, orientation, construction method, construction material further description	

Stratigraphic Matrix						Boundary to context above is:	
Is cut/ filled by	<u>4002</u>	<u>4003</u>	<u>4004</u>	<u>4005</u>	<u>4006</u>	<u>4007</u>	<input type="checkbox"/> Sharp <input type="checkbox"/> Clear <input type="checkbox"/> Diffuse/gradual <input type="checkbox"/> Unclear
This context is	<u>4008</u>	Abuts:					Boundary to context below is:
Cuts/ fills							<input type="checkbox"/> Sharp <input type="checkbox"/> Clear <input type="checkbox"/> Diffuse/gradual <input type="checkbox"/> Unclear

Interpretation	

Finds frequency	<input type="checkbox"/> Very frequent <input type="checkbox"/> Frequent (every trowel/brush) <input checked="" type="checkbox"/> Average (every 2nd trowel/ brush) <input type="checkbox"/> rare (ca. every 5th trowel/ brush) <input type="checkbox"/> Sterile
Finds	<input type="checkbox"/> Ceramics <input type="checkbox"/> Chipped stone <input type="checkbox"/> Ground stone <input type="checkbox"/> Bone <input type="checkbox"/> Worked bone <input type="checkbox"/> Human bone <input type="checkbox"/> Other: _____
Finds association	<input type="checkbox"/> Undisturbed since deposition (in situ) <input checked="" type="checkbox"/> Recently disturbed <input type="checkbox"/> other: _____

Photo #'s <u>284-285-286</u>
