

SITE CH	YEAR 04	ROOM # or AREA NAME 34 (yard 2)	CONTEXT NUMBER 419
TYPE (positive, negative, wall) positive	DEFINITION (cut in floor of X, fill of pit Y, north wall of room Z, etc.) uppermost layer of fill in well/cistern		
DESCRIPTION (include consistency, color, composition, inclusions, dimensions; for cuts, also include shape and orientation) Soft dark greenish brown with inclusions of pottery, lots of animal bone, decayed behind a some medium stones			
MUNSELL COLOR	ELEVATIONS (if more than one, sketch locations on back)		
FORMATION PROCESSES <input checked="" type="checkbox"/> NATURAL <input type="checkbox"/> ARTIFICIAL (circle one) <input checked="" type="checkbox"/> CASUAL <input type="checkbox"/> INTENTIONAL (circle one) TYPE:			
STATE OF PRESERVATION <input type="checkbox"/> Very poor <input checked="" type="checkbox"/> Poor <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Good <input type="checkbox"/> Very Good		STRATIGRAPHIC RELIABILITY <input type="checkbox"/> Very poor <input checked="" type="checkbox"/> Poor <input type="checkbox"/> Medium <input type="checkbox"/> Good <input type="checkbox"/> Very Good	
COVERS A20	COVERED BY		
CUTS	CUT BY		
FILLS	FILLED BY		
ABUTS	ABUTTED BY		
EQUALS	BONDS WITH		
INTERPRETATION			
MATERIAL DATABLE IN FIELD? (if yes, specify)			PRELIMINARY DATE
FINDS (tick) <input type="checkbox"/> Pot <input type="checkbox"/> Bone <input type="checkbox"/> Glass <input type="checkbox"/> Metal <input type="checkbox"/> Wood <input type="checkbox"/> Leather <input type="checkbox"/> Tile <input type="checkbox"/> Other <input type="checkbox"/> None	TILE: (quantity buckets?)	SPECIAL FINDS (number and description, continue on back if necessary) 2383 - arch. frag (stone)	
FLOAT? (Y/N)	SAMPLE? (if yes, # and type)	SECTION? (Y/N)	
PHOTO? (Y/N)	PLAN ? (Y/N)	NOTEBOOK PAGES	SKETCH ON BACK? (Y/N)
STRATIGRAPHIC NOTES/DOUBTS (include any comments on methods, contamination, excavation conditions, or anything else that seems relevant)			
			DATE
			INITIALS

