

LABORATORY OF ANTHROPOLOGY SITE RECORD

1. IDENTIFICATION & OWNERSHIP

LA Number: _____ (contact ARMS for site registration) ☐ **Site Update?** (complete at least pp. 1-2; see User's Guide)

Site Name(s): _____

Other Site Number(s): _____ *Agency Assigning Number: _____

*Current Site Owner(s): _____

*Government entities: enter agency name & administrative unit; Private owners: enter owner name(s) & address (if known); Land grants: enter grant name

Site Type: ☐ Structural ☐ Non-Structural Occupation Type: ☐ Prehistoric ☐ Historic ☐ Prehistoric/Historic ☐ Unknown

2. RECORDING INFORMATION

NMCRIS Activity No.: _____

Field Site Number: _____ Site Marker? ☐ no ☐ yes (specify ID#): _____

Recorder(s): _____

Agency: _____ Recording Date _____

(eg., 12-APR-2000) day month year

Site Accessibility (choose one): ☐ accessible ☐ buried (sterile overburden) ☐ flooded ☐ urbanized ☐ not accessible

Surface Visibility (% visible; choose one): ☐ 0% ☐ 1-25% ☐ 26-50% ☐ 51-75% ☐ 76-99% ☐ 100%

Remarks: _____

Recording Activities: ☐ sketch mapping ☐ photography
☐ instrument mapping (e.g., total station mapping) ☐ shovel or trowel tests; probes
☐ surface collection (controlled or uncontrolled) ☐ test excavation
☐ in-field artifact analysis ☐ excavation (data recovery)
☐ other activities (specify): _____

Description of Analysis or Excavation Activities: _____

Photographic Documentation: _____

Surface Collections (choose one): ☐ no surface collection

☐ uncontrolled surface collection ☐ collections of specific items only

☐ controlled (sample: <100%) ☐ controlled (complete: 100%)

☐ other method (describe): _____

Records Inventory: ☐ site location map ☐ excavation, collection, analysis records ☐ field journals, notes
☐ sketch map(s) ☐ photos, slides, and associated records ☐ NM Historic Building Inventory form
☐ instrument map(s) ☐ other records: _____

Repository for Original Records: _____

Repository for Collected Artifacts: _____

LA Number: _____

Field Number: _____

3. CONDITION

Archaeological Status: ☐ surface collection ☐ test excavation ☐ partial excavation ☐ complete excavation

Disturbance Sources: ☐ wind erosion ☐ water erosion ☐ bioturbation ☐ vandalism ☐ construction/land development
☐ other source (specify: _____)

Vandalism: ☐ defaced glyphs ☐ damaged/defaced building ☐ surface disturbance ☐ manual excavation
☐ mechanical excavation ☐ other vandalism (specify: _____)

Percentage of Site Intact (choose one): ☐ 0% ☐ 1-25% ☐ 26-50% ☐ 51-75% ☐ 76-99% ☐ 100%

Observations on Site Condition: _____

4. RECOMMENDATIONS (for Performer/Recorder use only)

National Register Eligibility (choose one): ☐ eligible ☐ not eligible ☐ not sure

***Applicable Criteria:** ☐ assoc. w/important events (a) ☐ distinctive architectural style, etc. (c)
☐ assoc. w/important persons (b) ☐ information potential (d)

Basis for Recommendation: _____

****Assessment of Project Impact:** _____

****Treatment Recommendations:** _____

*Recorder's opinion ONLY—this is not an official determination of eligibility **Performing agency: consult with sponsoring agency before completing these data items

5. SHPO CONSULTATIONS (for SHPO and Sponsor use only)

Sponsor NR Determination: ☐ eligible ☐ not eligible ☐ not determined **Applicable Criteria:** ☐ (a) ☐ (b) ☐ (c) ☐ (d)

Sponsor Staff: _____ **Date:** _____
day month year

Sponsor Remarks: _____

SHPO NR Determination: ☐ eligible ☐ not eligible ☐ not determined **Applicable Criteria:** ☐ (a) ☐ (b) ☐ (c) ☐ (d)

HPD staff: _____ **Date:** _____ **HPD Log No:** _____
day month year

Register Status: ☐ listed on National Register ☐ listed on State Register ☐ formal determination of eligibility

State Register No.: _____
SHPO Remarks: _____

LA Number: _____

Field Number: _____

6. LOCATION**Source Graphics:**

- ☐ USGS 7.5' (1:24,000) topo maps ☐ rectified aerial photos [Scale: _____]
☐ other topo maps [Scale: _____] ☐ unrectified aerial photos [Scale: _____]
☐ GPS unit GPS Accuracy: ☐ < 1.0 m ☐ 1-10 m ☐ 10-100 m ☐ >100 m
☐ other source (describe): _____

UTM Coordinates (@ center of site; at least one set of coordinates required):**Map-based coordinates** Datum: ☐ NAD 27 ☐ NAD 83

Zone: _____ E _____ N _____

GPS-based coordinates Datum: ☐ NAD 27 ☐ NAD 83

Zone: _____ E _____ N _____

Directions to Site: _____

_____ In highway R-O-W? ☐**Town** (if in city limits): _____ **State:** _____ **County:** _____**USGS Quadrangle Name:** _____**Date:** _____**USGS Code:** _____

PLSS Meridian	Unplatted	Township	Range	Section	1/4 Sections	Protracted?
_____	<input type="checkbox"/>	_____ N S	_____ E W	_____	_____	<input type="checkbox"/>
_____	<input type="checkbox"/>	_____ N S	_____ E W	_____	_____	<input type="checkbox"/>
_____	<input type="checkbox"/>	_____ N S	_____ E W	_____	_____	<input type="checkbox"/>

7. PHYSICAL DESCRIPTION**Site Dimensions:** _____ x _____ meters **Basis for Dimensions** (choose one): ☐ estimated ☐ measured

max. length max. width

Site Area: _____ sq m **Basis for Area** (choose one): ☐ estimated ☐ measured **Elevation:** _____ feet**Site Boundaries Complete?** (choose one): ☐ Yes ☐ No (explain): _____

Basis for Site Boundaries: ☐ distribution of archeological features & artifacts ☐ modern features or ground disturbance☐ property lines ☐ topographic features ☐ other (specify): _____**Depositional/Erosional Environment:** ☐ alluvial ☐ aeolian ☐ colluvial ☐ residual ☐ no deposition (on bedrock)☐ other process (describe): _____**Stratigraphy & Depth of Archeological Deposits** (choose one): ☐ unknown/not determined☐ no subsurface deposits present ☐ subsurface deposits present ☐ stratified subsurface deposits present**Estimated Depth of Deposits:** _____**Basis for Depth Determinations:** ☐ estimated ☐ shovel/trowel tests ☐ core/auger tests ☐ excavations☐ road or arroyo cuts ☐ rodent burrows ☐ other observations (describe): _____

LA Number: _____

Field Number: _____

7. PHYSICAL DESCRIPTION (continued)

Observations on Subsurface Archeological Deposits: _____

Local Vegetation (list observed species in decreasing order of dominance):

Overstory: _____

Understory: _____

Vegetation Community (choose one or two): ☐ forest ☐ woodland ☐ grassland ☐ scrubland ☐ desert scrubland ☐ marshland
☐ other community (specify): _____

Topographic Location:

<input type="checkbox"/> bench	<input type="checkbox"/> dune	<input type="checkbox"/> low rise	<input type="checkbox"/> ridge
<input type="checkbox"/> alluvial fan	<input type="checkbox"/> blowout	<input type="checkbox"/> flood plain/valley	<input type="checkbox"/> mesa/butte
<input type="checkbox"/> arroyo/wash	<input type="checkbox"/> canyon rim	<input type="checkbox"/> foothill/mountain front	<input type="checkbox"/> mountain
<input type="checkbox"/> badlands	<input type="checkbox"/> cave	<input type="checkbox"/> hill slope	<input type="checkbox"/> open canyon floor
<input type="checkbox"/> base of cliff	<input type="checkbox"/> cliff/scarp/bluff	<input type="checkbox"/> hill top	<input type="checkbox"/> plain/flat
<input type="checkbox"/> base of talus slope	<input type="checkbox"/> constricted canyon	<input type="checkbox"/> lava flow (malpais)	<input type="checkbox"/> terrace
<input type="checkbox"/> other location (describe): _____			

Observations on Site Setting: _____

8. ASSEMBLAGE DATA

Assemblage Content (all components):

Lithics:

- ☐ lithic debitage
- ☐ chipped-stone tools
- ☐ diagnostic projectile points
- ☐ non-local lithic material
- ☐ stone-tool manufacturing items
(cores, hammerstones, etc.)
- ☐ ground-stone tools
- ☐ other stone tools

☐ Other items (specify): _____

Prehistoric Ceramics

- ☐ whole ceramic vessels
- ☐ diagnostic ceramics
- ☐ other prehistoric ceramics

Historic Artifacts:

- ☐ diagnostic glass artifacts
- ☐ other glass artifacts
- ☐ diagnostic metal artifacts
- ☐ other metal artifacts
- ☐ whole ceramic vessel
- ☐ diagnostic ceramics
- ☐ other historic ceramics

Other Artifacts and Materials:

- ☐ bone tools
- ☐ faunal remains
- ☐ macrobotanical remains
- ☐ perishable artifacts
- ☐ ornaments
- ☐ figurines
- ☐ mineral specimens
- ☐ architectural stone
- ☐ burned adobe
- ☐ fire-cracked rock/burned caliche

LA Number: _____

Field Number: _____

8. ASSEMBLAGE DATA (continued)

Assemblage Size (all components):

estimated frequency

artifact class	0	1s	10s	100s	1000s	>10,000	*Counts (if <100)
lithic artifacts (choose one):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
(include debitage)							_____
prehistoric ceramics (choose one):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
historic artifacts (choose one):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
total assemblage size (choose one):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

*please provide rough counts (+/- 10 items) if estimated frequency is less than 100 items

Dating Potential: ☐ radiocarbon ☐ dendrochronology ☐ archeomagnetism ☐ obsidian hydration
☐ relative techniques (e.g. seriation, diagnostics, etc.) ☐ other methods (specify): _____

Assemblage Remarks: _____

9. CULTURAL/TEMPORAL AFFILIATIONS

Total Number of Defined Components: _____

(attach continuation sheets for Component #3 and greater)

Component #1 (Earliest)

Cultural Affiliation: ☐ Paleoindian ☐ Archaic ☐ Anasazi ☐ Mixed Anasazi/Mogollon ☐ Mogollon
☐ Casas Grandes ☐ Plains Village ☐ Plains Nomad ☐ Navajo ☐ Apache ☐ Ute ☐ Pueblo
☐ Hispanic ☐ Anglo/Euroamerican ☐ Unknown affiliation ☐ other affiliation (identify): _____

Basis for Temporal Affiliations (choose one): ☐ not applicable ☐ based on associated chronometric data or historic records
☐ associated diagnostic artifact or feature types ☐ based on analytically derived assemblage data or archeological experience

*Period of Occupation: (*see NMCRIS Guidelines for valid periods, default occupation dates, and phase/complex names)

*Begin Date

*End Date

Earliest Period: _____

Latest Period (if any): _____

(leave blank to use default dates)

Dating Status: ☐ radiocarbon ☐ dendrochronology ☐ archaeomagnetism ☐ obsidian hydration
☐ relative techniques (e.g. seriation, diagnostics, etc.) ☐ other methods (specify): _____

Basis for Cultural/Temporal Affiliation: _____

Component Type (choose one): ☐ Simple Feature(s) ☐ Artifact Scatter ☐ Artifact Scatter w/Features
☐ Single Residence ☐ Multiple Residence ☐ Residential Complex/Community ☐ Industrial
☐ Military ☐ Ranching/Agricultural ☐ Transportation/Communication ☐ Commercial
☐ Governmental ☐ Ceremonial ☐ Other Type (specify type and explain in remarks): _____

Remarks: _____

*Associated Phase/Complex Name(s): _____

Field Number: _____

COMPONENT #2

Basis for Temporal Affiliations (choose one): ☐ not applicable ☐ based on associated chronometric data or historic records
☐ associated diagnostic artifact or feature types ☐ based on analytically derived assemblage data or archeological experience

***Begin Date**

***End Date**

Earliest Period: _____

Latest Period (if any): _____

(leave blank to use default dates)

Dating Status: ☐ radiocarbon ☐ dendrochronology ☐ archaeomagnetism ☐ obsidian hydration

☐ relative techniques (e.g. seriation, diagnostics, etc.) ☐ other methods (specify):

Basis for Cultural/Temporal Affiliation: _____

Component Type (choose one):

<input type="checkbox"/> Simple Feature(s)	<input type="checkbox"/> Artifact Scatter	<input type="checkbox"/> Artifact Scatter w/Features
<input type="checkbox"/> Single Residence	<input type="checkbox"/> Multiple Residence	<input type="checkbox"/> Residential Complex/Community
<input type="checkbox"/> Military	<input type="checkbox"/> Ranching/Agricultural	<input type="checkbox"/> Transportation/Communication
<input type="checkbox"/> Governmental	<input type="checkbox"/> Ceremonial	<input type="checkbox"/> Industrial
	<input type="checkbox"/> Other Type (specify type and explain in remarks): _____	<input type="checkbox"/> Commercial

Remarks: _____

*Associated Phase/Complex Name(s): _____

[illegible]

***see Section 9 (Cultural-Temporal Affiliations) for Component Numbers; enter zero for unknown component associations

LA Number: _____

Field Number: _____

10. FEATURE DATA (continued)

*Feature Type	**Reliable ID ?	No. Observed	***Associated Component Nos.	Feature ID, Notes

*see NMCRIS User's guide for a list of valid feature types

**enter "?" for uncertain identifications

***see Section 9 (Cultural-Temporal Affiliations) for Component Numbers; enter zero for unknown component associations

Feature Remarks: _____

11. REFERENCES

***Written Sources of Information:** _____

*this item can be skipped if this form is submitted with an LA Investigation Record; please use American Antiquity style citations

Additional Sources of Information: _____

LA Number: _____

Field Number:_____

12. NARRATIVE DESCRIPTION

This image shows a full page of blank, lined paper. It features approximately 28 evenly spaced horizontal black lines across its entire width, typical of standard notebook or school paper. The background is a solid off-white color, and there are no margins, text, or other markings present.

13. SITE RECORD ATTACHMENTS

- ☐ site location map (USGS 7.5' topo; required) ☐ sketch map or site plan (required) ☐ continuation forms?
☐ other materials (itemize): _____

☐ other materials (itemize): _____

LA Number: _____

Field Number:_____

12. NARRATIVE DESCRIPTION (CONTINUED)

[illegible]