

DATE:

TO: D711

FROM: D713

SUBJECT: Error Correction in Processing of Data Set - Accession # 68-0217

- 1) File Type: STD (SD-1 format)
- 2) Project Ident.: (Line Island Exp)
- 3) Track Nos.: _____

I. Error Corrections as reported to Principal Investigator:

Error

Correction Completed (Check)

II. Additional error corrections:

Error

Correction Completed (Check)

III. Processor Name: _____

Step	Completion Date/Init.		Tape # or DSN	# of Files	BLKSIZE	LRECL	# RECORDS
ORIGINATOR TAPE	{old data}		JRP	LINEIS	1	3200	80
QUADI/SCAN TAPE			W12714	1	4000	80	no longer belongs
ASSIGNED FOR PROCESS.							to NODC
DDF EVALUATION							
QUALITY REVIEW							
PRELIMINARY DATA SORT							
PRELIMINARY MULCHEK							
FIRST USER TAPE							
WORK DISK FILE							
FINAL USER TAPE							
MULCHEK							
EDITED DISK FILE							
DATA SET "FINALIZED"							

TAPE OR DISK ASSIGNMENT SHEET

(MRL) 11/6/78

(Rev. 11/80)

ACCOUNT/TRACK NO.: 68-0217

TYPE OF TAPE	TAPE NUMBER	LABEL	LRECL	BLKSIZE	RECFM	REMARKS	# RECORDS
ORIGINATOR	LINE IS	N	80	3200	F	SD1 Format 9TRK 1600BPE ODD EBCDIC	
DUPLICATE	LINE IS W12714	N	80	3200	F	MASTER REC MISSING SD1 Format 9TRK 1600BPE ODD EBCDIC	no longer belongs to NOSC
REFORMATTED							
FINAL USER							
DISK FILE	DSN					REMARKS	# RECORDS
WORK DISK FILE							
EDITED DISK FILE							

DATA DOCUMENTATION FORM

AA FORM 24-13
(4-72)

U.S. DEPARTMENT OF COMMERCE
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION
NATIONAL OCEANOGRAPHIC DATA CENTER
RECORDS SECTION
ROCKVILLE, MARYLAND 20852

FORM APPROVED
O.M.B. No. 41-R2651

This form should accompany all data submissions to NODC. Section A, Originator Identification, must be completed when the data are submitted. It is highly desirable for NODC to also receive the remaining pertinent information at that time. This may be most easily accomplished by attaching reports, publications, or manuscripts which are readily available describing data collection, analysis, and format specifics. Readable, handwritten submissions are acceptable in all cases. All data shipments should be sent to the above address.

NODC REEL 10329
Cruise
3100020

A. ORIGINATOR IDENTIFICATION

THIS SECTION MUST BE COMPLETED BY DONOR FOR ALL DATA TRANSMITTALS

1. NAME AND ADDRESS OF INSTITUTION, LABORATORY, OR ACTIVITY WITH WHICH SUBMITTED DATA ARE ASSOCIATED <i>UNIVERSITY OF HAWAII Dept. of Oceanography Honolulu, HA, 96822</i>			
2. EXPEDITION, PROJECT, OR PROGRAM DURING WHICH DATA WERE COLLECTED <i>LINE ISLANDS EXPEDITION</i>		3. CRUISE NUMBER(S) USED BY ORIGINATOR TO IDENTIFY DATA IN THIS SHIPMENT <i>NONE STATION NUMBER ONLY</i>	
4. PLATFORM NAME(S) <i>USCGC SURVEYOR</i>	5. PLATFORM TYPE(S) (E.G., SHIP, BUOY, ETC.) <i>Ship</i>	6. PLATFORM AND OPERATOR NATIONALITY(IES)	
		PLATFORM	OPERATOR
		FROM: MO, DAY, YR <i>13 FEB 1967</i>	TO: MO, DAY, YR <i>31 MARCH 1967</i>
8. ARE DATA PROPRIETARY? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES IF YES, WHEN CAN THEY BE RELEASED FOR GENERAL USE? YEAR _____ MONTH _____		11. PLEASE DARKEN ALL MARSDEN SQUARES IN WHICH ANY DATA CONTAINED IN YOUR SUBMISSION WERE COLLECTED. GENERAL AREA	
9. ARE DATA DECLARED NATIONAL PROGRAM (DNP)? (I.E., SHOULD THEY BE INCLUDED IN WORLD DATA CENTERS HOLDINGS FOR INTERNATIONAL EXCHANGE?) <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> PART (SPECIFY BELOW)			
10. PERSON TO WHOM INQUIRIES CONCERNING DATA SHOULD BE ADDRESSED WITH TELEPHONE NUMBER (AND ADDRESS IF OTHER THAN IN ITEM-1) <i>DR. KLAUS WYRTKI University of Hawaii Department of Oceanography 525 Correa Road Honolulu, Hawaii 96822</i>			

B. SCIENTIFIC CONTENT

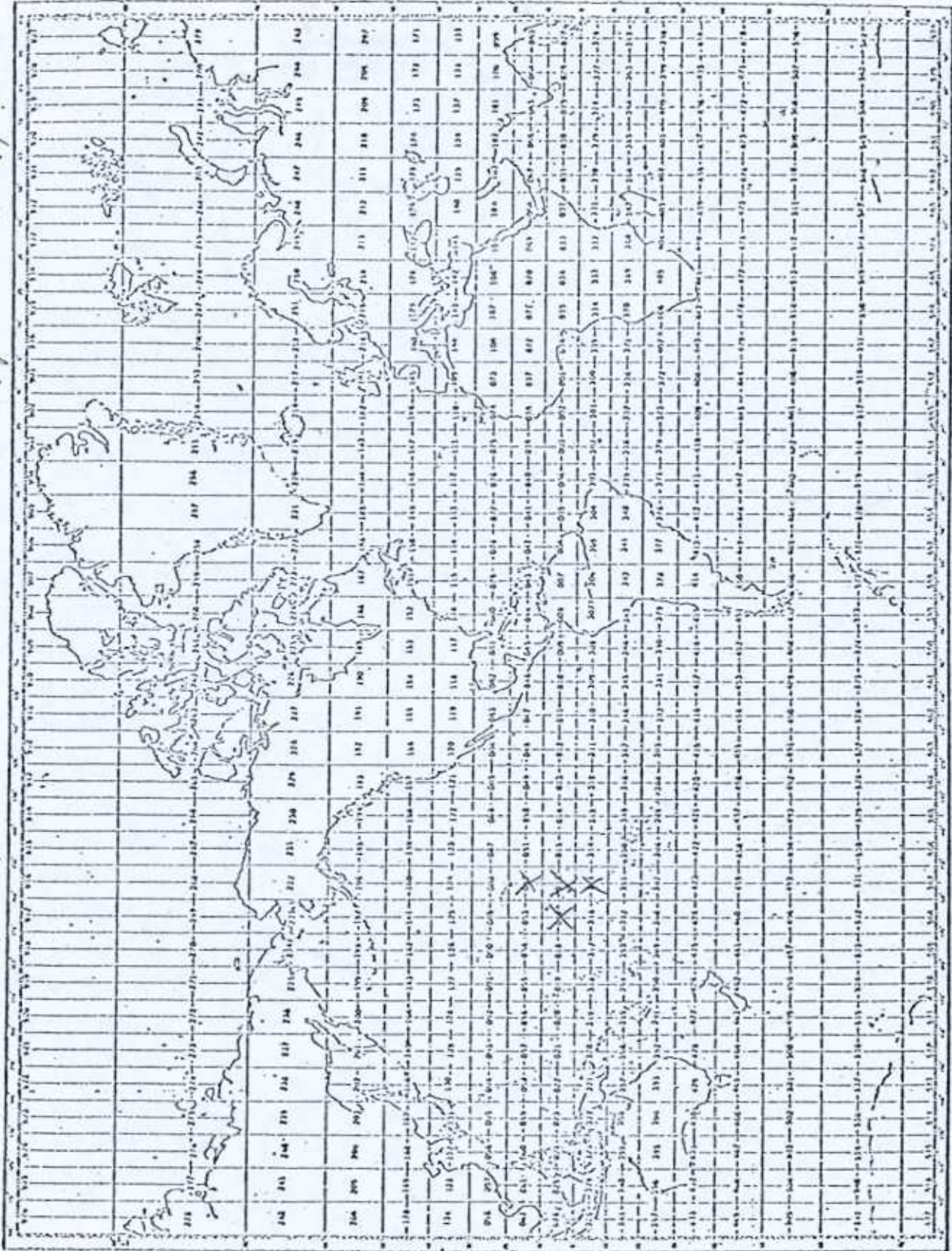
Include enough information concerning manner of observation, instrumentation, analysis, and data reduction routines to make them understandable to future users. Furnish the minimum documentation considered relevant to each data type. Documentation will be retained as a permanent part of the data and will be available to future users. Equivalent information already available may be substituted for this section of the form (i.e., publications, reports, and manuscripts describing observational and analytical methods). If you do not provide equivalent information by attachment, please complete the scientific content section in a manner similar to the one shown in the following example.

EXAMPLE (HYPOTHETICAL INFORMATION)

NAME OF DATA FIELD	REPORTING UNITS OR CODE	METHODS OF OBSERVATION AND INSTRUMENTS USED (SPECIFY TYPE AND MODEL)	ANALYTICAL METHODS (INCLUDING MODIFICATIONS) AND LABORATORY PROCEDURES	DATA PROCESSING TECHNIQUES WITH FILTERING AND AVERAGING
Salinity	‰	Nansen bottles	Inductive salinometer (Hytech model S510)	N/A (Not applicable)
		STD Bissett-Berman Model 9006	N/A	Values averaged over 5-meter intervals
Water color	Forel scale	Visual comparison with Forel bottles	N/A	N/A
Sediment size	φ units and percent by weight	Ewing corer	Standard sieves. Carbonate fraction removed by acid treatment	Same as "Sedimentary Rock Manual," Folk '65.

(SPACE IS PROVIDED ON THE FOLLOWING
TWO PAGES FOR THIS INFORMATION)

Line Island Expedition, 1967



Please place a large X in the square for which data are documented in attached Data Documentation Form.

B. SCIENTIFIC CONTENT

NAME OF DATA FIELD	REPORTING UNITS OR CODE	METHODS OF OBSERVATION AND INSTRUMENTS USED (SPECIFY TYPE AND MODEL)	ANALYTICAL METHODS (INCLUDING MODIFICATIONS) AND LABORATORY PROCEDURES	DATA PROCESSING TECHNIQUES WITH FILTERING AND AVERAGING
<p>Temp.</p> <p>Sal.</p> <p>Depth</p>	<p>°C</p> <p>‰</p> <p>m</p>	<p>} STD</p> <p>Bissett-Berman</p> <p>Model 9006</p>	<p>N/A.</p>	<p>Values are integrals over 2 seconds during lowering at 2 m/sec</p> <hr/> <p>they were filtered to remove salinity spikes.</p> <hr/> <p>* Data for stations 11, 42, 48, 71, 72, 78, 81 were read from the graphical recorder, because of breakdown of the electronic processing equipment</p>

C. DATA FORMAT

COMPLETE THIS SECTION FOR PUNCHED CARDS OR TAPE, MAGNETIC TAPE, OR DISC SUBMISSIONS.

1. LIST RECORD TYPES CONTAINED IN THE TRANSMITTAL OF YOUR FILE
METHOD OF IDENTIFYING EACH RECORD TYPE:

*NODC Station Data I Format
See NODC Pub. M-2*

2. GIVE BRIEF DESCRIPTION OF FILE ORGANIZATION

3. ATTRIBUTES AS EXPRESSED IN PL-1 ALGOL COBOL
 FORTRAN _____ LANGUAGE

4. RESPONSIBLE COMPUTER SPECIALIST:

NAME AND PHONE NUMBER _____
ADDRESS _____

COMPLETE THIS SECTION IF DATA ARE ON MAGNETIC TAPE

<p>5. RECORDING MODE</p> <input type="checkbox"/> BCD <input type="checkbox"/> BINARY <input type="checkbox"/> ASCII <input type="checkbox"/> EBCDIC <input type="checkbox"/> _____	<p>9. LENGTH OF INTER-RECORD GAP (IF KNOWN) <input type="checkbox"/> 3/4 INCH <input type="checkbox"/> _____</p>
<p>6. NUMBER OF TRACKS (CHANNELS)</p> <input type="checkbox"/> SEVEN <input checked="" type="checkbox"/> NINE <input type="checkbox"/> _____	<p>10. END OF FILE MARK <input type="checkbox"/> OCTAL 17 <input type="checkbox"/> _____</p>
<p>7. PARITY</p> <input checked="" type="checkbox"/> ODD <input type="checkbox"/> EVEN	<p>11. PASTE-ON-PAPER LABEL DESCRIPTION (INCLUDE ORIGINATOR NAME AND SOME LAY SPECIFICATIONS OF DATA TYPE, VOLUME NUMBER)</p>
<p>8. DENSITY</p> <input type="checkbox"/> 200 BPI <input checked="" type="checkbox"/> 1600 BPI <input type="checkbox"/> 556 BPI <input type="checkbox"/> 800 BPI <input type="checkbox"/> _____	<p>12. PHYSICAL BLOCK LENGTH IN BYTES 3200</p> <p>13. LENGTH OF BYTES IN BITS</p>

DATE:

TO: OC12

FROM: OC13

SUBJECT: Error Correction in Processing of Data Set - Accession # 6800217

- 1) File Type: C148(STD)
- 2) Project Ident.: _____
- 3) ~~Track~~ ^{Ref} Nos.: 310020

I. Error Corrections as reported to Principal Investigator:

Error

Correction Completed (Check)

II. Additional error corrections:

Error

Correction Completed (Check)

III. Processor Name: _____

TAPE ASSIGNMENT SHEET

ACCESSION NO.: 6800217

Ref. TRACK NO(s): 310020

Type of Tape	Tape Number	Label	LRECL	BLKSIZE	RECFM	Remarks
Originator	Ø1358	S #L	80	3200	9-tr 1600 BPI EBCDIC (?)	
Duplicate	W08222	SL	80	4000	9-tr 1600 BPI ASCII	!!
Reformatted						
First User						
Final User						

Step	Completion Date/Init.		Tape # or DSN	# of Files	BLKSIZE	LRECL	# RECORDS
INITATOR TAPE	8/8/83	8/8/83	01358	74	3200		
I/SCAN TAPE	8/8/83	8/8/83	W08222	74	4000	80	
SIGNED FOR PROCESS.							
EVALUATION							
QUALITY REVIEW							
TEMPORINARY DATA SORT							
TEMPORINARY CHECK							
TEST USER TAPE							
BACK DISK FILE							
FINAL USER TAPE							
FINAL CHECK							
TESTED DISK FILE							
DATA SET "FINALIZED"							

>C11 EQ 6800217

07/28/83 07:16:33

ACCESSION NUMBER 6800217
DATE RECEIVED 112268

REFERENCE = 310020 CRUISE = DATES 020167-030167 DUC = 3
COUNTRY = 31 UNITED STATES
R2-HI UNIV. OF HAWAII (HONOLULU)
FILE-ALIAS = C148 HIGH RESOLUTION STD DATA
PROJECT = ♦♦♦♦ NO PROJECT MEDIUM = 21 MAG TAPE NON-NOBC
PLATFORM = SU SURVEYOR TYPE = SHIP
STATIONS-IN = 74 STATIONS-OUT = 0 RECORD COUNT = 0
STATUS: RES SU SP H-PRO PROCESS DIP MASTER RETCOR
110382 030176