

DATA DOCUMENTATION FORM

NOAA 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.

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
Marine Resources Research Institute
P. O. Box 12559
Charleston, S. C. 29412

2. EXPEDITION, PROJECT, OR PROGRAM DURING WHICH DATA WERE COLLECTED
MARMAP (Marine Resources Monitoring Assessment and Prediction)

3. CRUISE NUMBER(S) USED BY ORIGINATOR TO IDENTIFY DATA IN THIS SHIPMENT
D74-1

4. PLATFORM NAME(S)
R/V Dolphin

5. PLATFORM TYPE(S) (E.G., SHIP, BUOY, ETC.)
Ship

6. PLATFORM AND OPERATOR NATIONALITY(IES)
USA USA

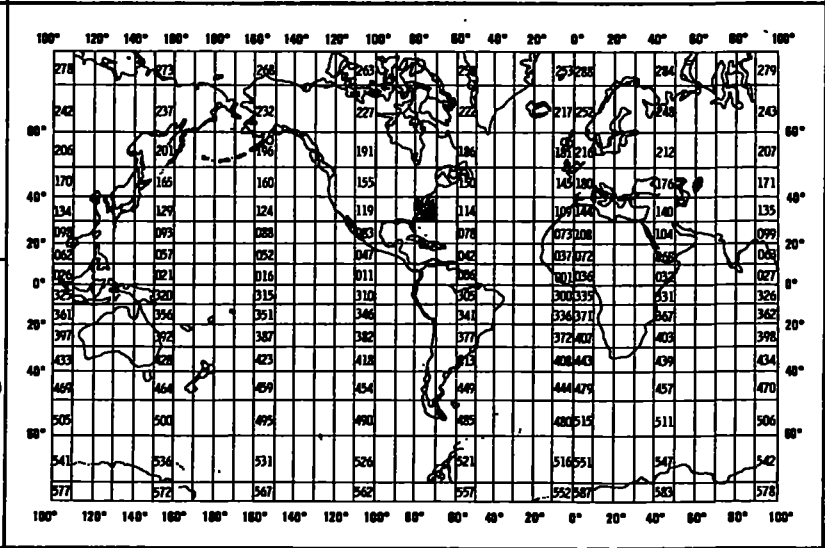
7. DATES
FROM: MO, DAY, YR TO: MO, DAY, YR
Jan. 8, '74 Jan. 13, '74

8. ARE DATA PROPRIETARY?
[X] NO [] 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?)
[] NO [X] YES [] PART (SPECIFY BELOW)

10. PERSON TO WHOM INQUIRIES CONCERNING DATA SHOULD BE ADDRESSED WITH TELEPHONE NUMBER (AND ADDRESS IF OTHER THAN IN ITEM-1)
Atlantic Environmental Group (F182)
NMFS Page Building #2 Room 219
3300 Whitehaven St., NW
Washington, D. C. 20235
(202) 343-6235



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	700	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)

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
Salinity	0/00	Niskin Bottles	Induction Salinometer Beckman Model RS 7B	N/A
Dissolved O ₂	ml/l	Niskin Bottle	Oxygen Probe Yellow Springs Mod. 5420A	N/A
Temperature	°C	Reversing Thermometer XBT - MBT	N/A	N/A
Nitrites Nitrates Silicates	ug-at/l ug-at/l ug-at/l	Niskin Bottle Niskin Bottle Niskin Bottle	Auto Analyzer II Technicon	N/A
Phosphates	ug-at/l	Niskin Bottle	Bausch & Lomb uv 200 Spectrophotometer (run manually)	N/A

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

C. DATA FORMAT

This information is requested only for data transmitted on punched cards or magnetic tape. Have one of your data processing specialists furnish answers either on the form or by attaching equivalent readily available documentation. Identify the nature and meaning of all entries and explain any codes used.

1. List the record types contained in your file transmittal (e.g., tape label record, master, detail, standard depth, etc.).
2. Describe briefly how your file is organized.
- 3-13. Self-explanatory.
14. Enter the field name as appropriate (e.g., header information, temperature, depth, salinity).
15. Enter starting position of the field.
16. Enter field length in number columns and unit of measurement (e.g., bit, byte, character, word) in unit column.
17. Enter attributes as expressed in the programming language specified in item 3 (e.g., "F 4.1," "BINARY FIXED (5.1)").
18. Describe field. If sort field, enter "SORT 1" for first, "SORT 2" for second, etc. If field is repeated, state number of times it is repeated.

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
GIVE METHOD OF IDENTIFYING EACH RECORD TYPE

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> <p><input type="checkbox"/> BCD <input type="checkbox"/> BINARY</p> <p><input type="checkbox"/> ASCII <input type="checkbox"/> EBCDIC</p> <p><input type="checkbox"/> _____</p>	<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> <p><input type="checkbox"/> SEVEN</p> <p><input type="checkbox"/> NINE</p> <p><input type="checkbox"/> _____</p>	<p>10. END OF FILE MARK</p> <p><input type="checkbox"/> OCTAL 17</p> <p><input type="checkbox"/> _____</p>
<p>7. PARITY</p> <p><input type="checkbox"/> ODD</p> <p><input type="checkbox"/> EVEN</p>	<p>11. PASTE-ON-PAPER LABEL DESCRIPTION (INCLUDE ORIGINATOR NAME AND SOME LAY SPECIFICATIONS OF DATA TYPE, VOLUME NUMBER)</p>
<p>8. DENSITY</p> <p><input type="checkbox"/> 200 BPI <input type="checkbox"/> 1600 BPI</p> <p><input type="checkbox"/> 556 BPI</p> <p><input type="checkbox"/> 800 BPI</p> <p><input type="checkbox"/> _____</p>	<p>12. PHYSICAL BLOCK LENGTH IN BYTES</p> <p>13. LENGTH OF BYTES IN BITS</p>

RECORD FORMAT DESCRIPTION

RECORD NAME _____

14. FIELD NAME	15. POSITION FROM - 1 MEASURED IN <small>(e.g., bits, bytes)</small>	16. LENGTH		17. ATTRIBUTES	18. USE AND MEANING
		NUMBER	UNITS		

RECORD FORMAT DESCRIPTION

RECORD NAME _____

14. FIELD NAME	15. POSITION FROM - 1 MEASURED IN <small>(e.g., bits, bytes)</small>	16. LENGTH		17. ATTRIBUTES	18. USE AND MEANING
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RECORD FORMAT DESCRIPTION

RECORD NAME _____

14. FIELD NAME	15. POSITION FROM - 1 MEASURED IN _____ <small>(e.g., bits, bytes)</small>	16. LENGTH		17. ATTRIBUTES	18. USE AND MEANING
		NUMBER	UNITS		

D. INSTRUMENT CALIBRATION

This calibration information will be utilized by NOAA's National Oceanographic Instrumentation Center in their efforts to develop calibration standards for voluntary acceptance by the oceanographic community. Identify the instruments used by your organization to obtain the scientific content of the DDF (i.e., STD, temperature and pressure sensors, salinometers, oxygen meters, velocimeters, etc.) and furnish the calibration data requested by completing and/or checking ("✓") the appropriate spaces. Add the interval time (i.e., 3 months, 6 months, 9 months, etc.) if the fixed interval calibration cycle is checked.

INSTRUMENT TYPE (MFR., MODEL NO.)	DATE OF LAST CALIBRATION	INSTRUMENT WAS CALIBRATED BY		CHECK ONE: INSTRUMENT IS CALIBRATED					INSTRUMENT IS NOT CALI- BRATED (✓)
		YOUR ORGANIZATION (✓)	OTHER ORGANIZATION (GIVE NAME)	AT FIXED INTERVALS (✓)	BEFORE OR AFTER USE (✓)	BEFORE AND AFTER USE (✓)	ONLY AFTER REPAIR (✓)	ONLY WHEN NEW (✓)	
Induction Salinometer Beckman RS 7 B		X			X				
Oxygen Probe Mod. 5420A		X			X				
Reversing Thermometer	Jan., 1973		NOIC	12 mos.					
Autoanalyzer II		X			X				
Bausch & Lomb uv200 Spectrophotometer		X			X				
XBT-Sippican		X			X				

Password:

accNo	fileA	refNo	proj	inst	ship	startDate	cruise	catId
7400287	C116	044795	0051	31J5	31DP	1974/01/09	74-01	284477
7400287	C100	312254	0051	31J5	31DP	1974/01/09	74-01	284478

(2 rows affected)

Password:

accNo	fileA	refNo	ship	staCnt	recCnt	startDate	endDate
7400287	C116	044795	31DP	33	33	Jan 9 1974	Jan 12 1974
7400287	C100	312254	31DP	33	33	Jan 9 1974	Jan 12 1974

(2 rows affected)