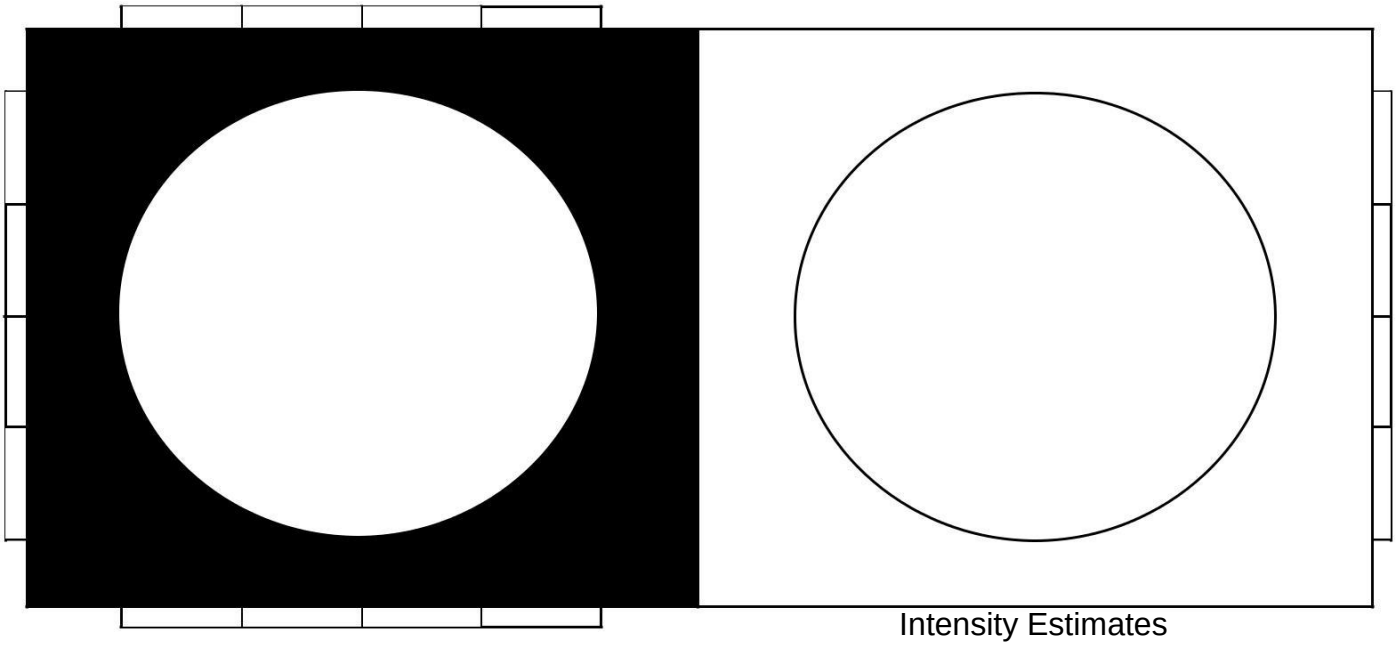
# Uranus Observation Form



Intensity Estimates

Date(U.T.):_____
Time (U.T.):_____
L1: _____ L2:_____ L3:_____
Instrument:_____
Magnification:_____x _____x _____x
Filters (Wratten):_____
Seeing (1-10):_____ Antoniadi (I-V):____
Transparency (1-6):_____
Name:_____
Address:_____
_____
_____

| No. | Time (U.T.) | Comments |
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