

16th. February 1917.

To:-
C.O.
Centre Group Field Artillery.

Report upon bombardment of position held by
27th. Battery, Centre Group Field Artillery, by Gas Shells
on the afternoon of 16/2/17.

1.15 pm. Shelling commenced: ranging shots 5.9 H.E.
1.15 to 1.40 pm. H.E. and occasional shrapnel.
1.40 pm. Arrival of first gas shell. Shell burst on
percussion in immediate vicinity of Gun detachment, who were
sheltering in shell-proof pit. They report faint sweetish odour,
coincident with explosion: Profuse watering of eyes: Irritation
of nasal mucosa and throat. No tendency to cough.
1.40 pm. Gas Alarm.
1.40 to 2.35 pm. Continuous shelling mixed H.E. occasional
shrapnel and gas shells.
2.35 pm. Cessation of bombardment. Gunners left
refuges and evacuated position.

Gas.

Odour. Sweetish: somewhat suggestive of ordinary Tear Gas,
but without the distinct "Pineapple" odour. I would say that
from the smell, it was not pure lacrimatory gas.

Appearance. No, visible vapour.

Vapourisation. Apparently rapid: owing to the large number
of shells in a concentrated area and the fact that the majority
burst on masonry it is difficult to fix a definite distance
from any one localised shell-hole, at which the gas could be
smelt. Gas remained in rooms gunpits, and other confined spaces,
for over 2 hours, without appreciable diminution in strength.
It was expelled by fires. Positions on masonry at which shell
burst smelt strongly.

Effects. Profuse watering of the eyes: exposure to
concentrated vapour produced almost instant ~~and~~ engorgement of
vessels of the conjunctiva.

In-halation caused no cough, nor desire to
cough: but was immediately followed by dizziness, nausea, and a
rapid soft, bounding pulse.

Later, about an hour, dull headache and
actual vomiting.

Casualties. Two.

(1). Gnr. W. This man was exposed to the first burst.
He complained of faintness and was uncertain in gait. In an
hour he vomited, and exhibited a fast, soft, and bounding pulse.
Complained of headache. Later, face very flushed, pink, thickness
of speech, increase in salivation, and a cough. Before could
be observed further, was evacuated.

(2). Gnr. B. Slight, vomited: fast pulse, feeling of
faintness and loss of energy. Evacuated before further observation.

Gnr. W. had engorgement of conjunctival vessels, and
evidently got a fair amount of gas before adjusting the helmet.
He was very close to the burst.

Box Respirator used.

No other cases by 5.30 pm.

C. W. Dawson

Capt.

R.M.O. Centre Group Field Artillery.

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REPORT ON SHELLING OF BATTERY 16/2/17

12.45 P.M. Enemy commenced shelling towards Railway line I 21.c. The method of ranging appeared to be by means of a Section salvo firing a bracket. For some twenty rounds these shells fell in the vicinity of the railways and buildings adjacent to the bridge I 21.d. 20.15. No enemy aeroplanes were visible. Our aeroplanes were active at the time.

The shelling dropped back to the vicinity of the battery position.

This was reported to Group Headquarters. All men under cover. At this stage a shell fell which gave off dense white fumes of lachrymatory gas. All men were ordered to wear their Box Respirators as some "dud" shells were also falling at this time.

Heavy shelling continued until 2.45 p.m. During this time the men could not be safely withdrawn to a flank.

One man who was feeling sick was examined by the R.M.O. and sent to the A.D.S.

2.45 P.M.

Shelling ceased. All men were moved to a flank and Respirators taken off. Another man was sick and examined by R.M.O.

Braziers were started in the gun pits and telephonist dug out to drive out the gas.

About 100/150 rounds of 4.2 or 5.9 fell about the Battery position. The enemy carried out sweeping at several stages.

No damage to equipment or personnel other than above was effected.

(Sgd) W.A.H. Peart Captain
O.C. 27th. Battery.