FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								

37 Estimated average burden hours per response: 0.5

Check this box if no longer subject to	)
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(h)	

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

								-													
Name and Address of Reporting Person*						2. Issuer Name <b>and</b> Ticker or Trading Symbol QUANEX CORP [ NX ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
MURPHY TERRY M					130	COUNTY COINT [ IVY ]										Direc	ctor		10% O	wner	
					-									_	X	Offic belov	er (give title w)		Other (	(specify	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)										So	enior VP-Finance and CF		d CEO	<b>1</b>	
1900 WEST LOOP SOUTH					11/	11/01/2005										JC.	11101 V1-11	ilance an	u CI (	,	
SUITE 1	500																				
JUIL 1	300				4 If	4 If Amandment, Date of Original Filed (Month/Day/Mass)									C. Individual or Jaint/Croup Filing (Charle Arriberty						
-					-   4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)															X	Forn	n filed by One	e Reportin	n Pers	on	
HOUSTO	ON TY	ζ 7	77027												71		,	•	•		
					-											Form filed by More than One Reporting Person					
(City)	(6+	ate) (	Zip)													. 0.0					
(City)	(31	ale) (	<u>Ζ</u> ιμ)																		
		Tabl	e I - No	n-Deri\	vative	Se	curit	es Ac	quirec	l, Dis	sposed o	of, or	r Ben	efici	ally	Owne	ed				
1. Title of S	Security (Inst	r. 3)		2. Trans	action		2A. Dee		3.	3. 4. Securities Acquired (A)								6. Owner		7. Nature	
	• •	,		Date (Month/	Day/Voa		Execution Date,					Disposed Of (D) (Instr. 3, 4							orm: Direct D) or Indirect	of Indirect Beneficial	
(Mon				(WOTHIN			if any (Month/Day/Year)				"				Owner Repor		d Following		(I) (Instr. 4)	Ownership (Instr. 4)	
										<del>-                                     </del>		(A) or Dr					ted action(s)	l			
										·   v	Amount		(A) 01 (D)			(Instr. 3 and 4)					
Common Stock 11/01/						/2005 1		11/02/2005		$\top$	7.862	A \$5		\$58	3.51 15,8		397.3615	D			
Common Stock						11/02/2005					1.002						<u> </u>				
		Ta									osed of,				y Ov	vned					
			(	e.g., p	uts, c	alls	s, wai	rants,	optio	ns, c	onvertib	ole s	ecuri	ties)							
1. Title of	2.	3. Transaction	3A. Deem		4.		5. Number			6. Date Exercisable and			7. Title and		8. Price of		9. Number o			11. Nature	
Derivative Security	Conversion or Exercise	Date   (Month/Day/Year)	Execution if any	n Date,		ansaction ode (Instr.				ion Da /Day/Y			Amount of Securities		Derivative Security		derivative Securities		Ownership Form:	of Indirect Beneficial	
(Instr. 3)	Price of		(Month/Da	ay/Year)	8)		Sec	Securities		(Month/Day/Year)			Underlying			r. 5)	Beneficially	Direc	Direct (D)	Ownership	
Derivative Security							Acquired (A) or			Derivative Security (Instr. and 4)				netr 3	2		Owned Following	or Inc	lirect str. 4)	(Instr. 4)	
								Disposed						1311. 3			Reported		Ju. 4,		
							of (D) (Instr. 3, 4										Transaction (Instr. 4)	(s)			
								and 5)									(111511. 4)				
			1 1							Amou		1									
													or	iouiit							
									Date		Expiration		Nu of	mber							
										xercisable Date Title											

## **Explanation of Responses:**

1. Shares acquired through Employee Stock Purchase Plan.

Terry M Murphy

11/02/2005

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.