FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

1. Name and Address of Reporting Person* WELLEK RICHARD L					2. Issuer Name and Ticker or Trading Symbol QUANEX CORP [NX]							(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
WELLEN RIGHTIND L													Compared to the compared to	r	10% C	wner		
(Last) (First) (Middle) 1900 WEST LOOP SOUTH						3. Date of Earliest Transaction (Month/Day/Year) 08/26/2004							Officer (give title Other (specify below)					
SUITE 1500						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable				
(Street)												Line)						
HOUST	ON TX 77027												X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)															
		Tal	ble I - Non-I	Derivat	tive Se	curit	ies A	Acquired	, Dis	posed of	, or Ben	eficiall	y Owned					
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date					Execution Date,			Code (Instr. 5)				Beneficially Owned Following		. Ownership orm: Direct D) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	on(s)		(Instr. 4)		
			Table II - De							osed of, convertib			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion Oate (Month/Day/Year) Derivative Security 3. Transaction Date Execution Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)			Cod	nsaction e (Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)			
				Cod	le V	(A)	(D)	Date Exercisabl		expiration pate	Title	Amount or Number of Shares						
Stock Options (Right to buy)	\$40.05							10/31/200	3	10/31/2013	Common Stock	2,000		2,000	D			
Phantom Stock Units ⁽¹⁾	\$0 ⁽²⁾	08/26/2004		A		234		08/26/2004	(3) 0	8/08/1988 ⁽³⁾	Common Stock	234	\$42.54	1,067	D			
Phantom Stock Units ⁽⁴⁾	\$0 ⁽²⁾	08/26/2004		A		48		08/26/2004	,(3) 0	8/08/1988 ⁽³⁾	Common Stock	48	\$42.54	1,115	D			

Explanation of Responses:

- 1. Units that are credited to the participants account under the Quanex Corporation Deferred Compensation Plan as a result of the participant's deferral of income or fees, as the case may be.
- 2. Conversion price is 1-for-1.
- 3. All units credited under the Deferred Compensation Plan are 100% vested at all times; provided, however, that if a participant receives a benefit from the Deferred Compensation Plan for any reason other than death, disability or retirement within three years after a deferral is credited to a participant's account, any matching awards made by the Company with respect to such deferral will be forfeited. Distributions under the Deferred Compensation Plan are made beginning on a specified date selected bythe participant or upon a participant's death, disability, or termination of employment.
- 4. Represents units credited to a participant's account under the Deferred Compensation Plan as a result of the Company's 20% matching award of the participant's deferral of income or fees, as the case may be.

Terry M. Murphy, Power of 08/30/2004 <u>Attorney</u>

** 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.